THE FAILURE OF SURGERY IN CANCER

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THE FAILURE OF SURGERY IN CANCER.

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AND

WHAT HAS MEDICINE DONE DURING THE QUEEN'S REIGN?

BY

SAMUEL KENNEDY

F.R.C.P. AND F.R.C.S.E.D.

LONDON

SIMPKIN, MARSHALL, HAMILTON, KENT, & CO., LIMITED

1900

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PREFACE.

I FEAR I shall be abused in some quarters for issuing a book like this, and be accused of all manner of unworthy motives. I shall therefore set forth very briefly the reasons that have prompted and the motives that have influenced me in doing so.

1. My original purpose was to write a brief pamphlet, in which I might furnish a reply to the numerous enquiries that have reached me from far and near during the past seven years with reference to the "Five Test Cases" placed under a committee of distinguished surgeons to demonstrate the capability, or otherwise, of "Count Mattei's Homœopathic Remedies" to cure Cancer, so that, by furnishing a detailed account of their whole course and termination, I might at the same time refute the unscrupulously reiterated but utterly unfounded assertions on the part of many public journals and members of the profession that we had abandoned these patients in despair, and thereby acknowledged that the whole thing was, as alleged, "a delusion, a mockery, and a snare."

2. While engaged in doing this, in what would have been a simple pamphlet form, at the beginning of last year a remarkable volume issued from the pen of Dr. Herbert Snow, with whom I had had a passage of arms some ten years ago (see *National Review*, July, 1890). It was announced as setting forth Dr. Snow's "twenty-two years' experience of cancerous and other

tumours." I at once procured it, and having carefully perused it, felt intensely interested by the extraordinary admissions and assertions made therein, supported and confirmed by an array of startling statistics on the subject of cancer mortality as supplied by the Registrar-General. This led me to follow these statistics back to the year of our gracious Sovereign's accession, and to carry them down to the year of her Golden Jubilee, and then present them, as I have done, in all their naked truthfulness, so as to enlist every lover of his country to contend for and support Dr. Snow's conclusion, "that action by the State is imperatively indicated"—I would say *demanded.* I would have valued this book of Dr. Snow's still more had he told us how many thousand cases had passed through his own hands at Brompton and elsewhere during these twenty-two years, and how many of these, if any, were cured by means of operation; likewise, how many had their sufferings relieved and their lives lengthened; but of all this, to me, and to the general public, of chiefest interest, no account whatever is given.

3. Whilst prosecuting this interesting research on the same lines as are contained in Dr. Snow's book, there appeared another valuable contribution to this painful subject in a special number of *The Practitioner*—a very popular and ably conducted medical journal—embodying in separate articles the latest up-to-date opinions of the leading living experts (both here and in the United States of America) on the subject and treatment of cancer; and I felt that these latest utterances could not be overlooked if my survey of the subject would be complete. This added materially to the length of this book.

4. Then, having spent many earnest hours in the company of the Registrar-General and so many able practitioners at home and abroad, it flashed upon me that I might with advantage enquire what advance the science of medicine (or of healing by medicine) had made during the same remarkable epoch, and what advantage the nation, as such, had gained thereby. And here I found, and it was a dis-

appointing and painful discovery, that, so far as the actual treatment of disease was concerned, despite all the valuable discoveries of the past sixty years, the conditions of things in the physician's sphere was no better than that in the surgeon's, but, if anything, much worse; for whereas the *surgeon* seemed to have made a great and in some respects unparalleled progress all round, with the solitary exception of the *surgical* treatment of cancer, the *physician* appeared to have accomplished actually nothing, but had rather lost ground all round, so far as the severest forms of disease are concerned. Thus, the great decrease of mortality in such destructive diseases as *small-pox* and *typhus* fever are due not to any improved treatment of these diseases by means of old remedies or new, but almost entirely to improved sanitary laws and better feeding and housing of the poorer classes.

I searched in vain for progress under the regime of old physic, and I think the statistics copied from the Registrar-General's Official Reports will be deemed incontrovertible evidence. And then I turned, with relief and pleasure, in another direction to contemplate the only real progress that medicine has made this century, and found it furnished by the researches of the late Samuel Hahnemann, and confirmed increasingly by the splendid results obtained by his enthusiastic disciples. This, I think, will be abundantly demonstrated by the indisputable statistics which I am enabled to furnish.

5. In closing this outline of my little volume I beg to say that I have set nothing down in malice or envy or with a desire to injure my fellow-practitioners, but rather to rouse all such (however rough the awakening may appear to them to be) to survey their daily practice and its results, and ask themselves, Are they satisfied? Can they rest contented therewith? Looking at the undoubted results flowing from the use of the same medicines which they use (according to the law first propounded by the immortal Hahnemann), are they content to continue prescribing according to the old traditions,

or are they willing to accept the help in the divine work of healing which is open to them through the distinct teaching of Hahnemann, who was originally one of themselves, and employed no secret remedies, but such as are accessible to them all, and the healing power of which, prepared as he describes, can be put to the test in the space of a single week. The Governors of the Middlesex Hospital have just sanctioned an initial outlay of £465 17*s.* for apparatus, fittings, etc., and £550 for annual expenditure, for a thorough investigation of cancer. This investigation is expected to last for years. Let them sanction an expenditure of £100, and for three months place the beds of a single ward (fifty or sixty at least) under the charge of half a dozen of our leading homœopathic physicians and surgeons, and if by the end of that time the immeasurably superior results of homœopathic treatment be not fully demonstrated, I will undertake to revoke all that I have ever written, and acknowledge that I am worthy of universal contempt.

6. I would with equal earnestness appeal to all my homœopathic *confrères* at home and abroad, that whilst disliking, as they do, quite as much as allopaths—nay, I should rather say immeasurably more—all secret remedies (for it is notorious that the patent preparations now popular amongst the leading physicians of the present day far outnumber the secret remedies of Count Mattei), that they would put these remedies fairly to the proof, and obtain all the benefit they can obtain from them in the treatment of diseases to which they are alleged to be specifically adapted, and then adopt one of two courses: either, if they succeed in yielding good results, appeal to Count Ventoroli Mattei to declare their composition, whilst continuing their preparation; or, finding them to fail, or the Count to refuse their revelation, denounce him and them alike for ever.

Finally, in all I have written I have had, and can have, no selfish aim! I have had a very busy life during these past fifty years, and been prospered in my various work far beyond

my highest expectations, and in the ordinary course of things must retire shortly from its heavy toils. I am intensely anxious, however, to rouse, if I can, all who are entrusted with the healing of disease to abandon their inherited prejudices, and investigate the claims of any new form of drug or method of treatment which have yielded results, which they can neither rival nor disprove, and give the world, that naturally looks to them, the benefit of their discoveries. We do not want a single man to abandon the profession in disgust or despair—as not a few have been tempted to do—because of its uncertain and unsatisfying results; but we would entreat all who are engaged in fighting the various diseases to which flesh is heir to see well to it that they have the best weapons in their hands that can be produced or procured, whether they are made in France, or Germany, or Italy, so that the precious lives of the many thousands daily dependent on their advice may not be sacrificed at the shrine of old-fashioned ideas and old-time drugs.

And should these turn a deaf ear to my counsel, I must then make my appeal to "the people," who are, after all, the most deeply interested in these matters, and ask them to "read, mark, learn, and inwardly digest" the unpleasant facts presented in the following pages, and draw their own inferences from them, and act in accordance therewith.

SAMUEL KENNEDY, L.R.C.P. AND L.R.C.S. EDIN.

96, ADDISON ROAD, LONDON, W.

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FAILURE OF SURGERY IN THE TREATMENT OF CANCER.

THE GOLDEN AGE (1837-1897).

THE Golden Age, as the Victorian era has been designated, has witnessed the most extraordinary advances in science and art, in private enterprise and public commerce, in the extensions of our possessions abroad, and the discoveries of our sons at home, which our British nation has ever known.

Nowhere has this advance been more remarkable than in the domain of medicine and the practice of surgery. The discovery of anæsthesia by Morton, a Boston dentist, in the year 1846, and its first employment in the perfected form of chloroform by Sir James Simpson in 1847, on the one hand, rendering the endurance of pain possible, and of antiseptics by Lord Lister in 1876, on the other hand, facilitating safe and speedy recovery from wounds made in operations, virtually revolutionised the entire practice of surgery; whilst the general introduction of Jenner's wonderful discovery of vaccination in 1796, and the persevering labours of distinguished sanitary reformers in the promulgation and application of rational laws of public health, have been instrumental in virtually stamping

out such diseases as small-pox, cholera, and typhus, whose periodical outbreaks were more justly feared by the community at large than the invasion of a foreign foe.

Naturally enough the praises of these discoveries and their happy results have been sung on every hand during the years 1887 and 1897, and by none more boastingly than by the associations of physicians and surgeons, when they gathered together to review the past and forecast the future.

At the annual meeting of our own British Medical Association, which assembled for the first time in one of the principal cities of our Colonial Empire, thereby illustrating one excellent way of consolidating our Anglo-Saxon race, full expression was given to these exultations; and equally glowing references were made at Carlisle twelve years ago, when the Golden Jubilee of our beloved Queen was celebrated.

Professor Roddick,

the President of the great convention at Montreal on September 4th, 1897, in his address on Surgery, referring to Lord Lister's connection with the introduction of antiseptic measures, used the following language: "Lord Lister stands for the rise and zenith of modern surgery. We have only to compare the surgery of the period before 1876 with the surgery as practised to-day to appreciate all that he has done for the science. The remark is frequently heard that Lord Lister has made operations possible which only twenty-five years ago would have been considered criminal."

Dr. Osler,

Professor of Medicine in John Hopkins magnificent University at Baltimore, taking for his subject, "British Medicine in Greater Britain," spoke thus: "To trace successfully the evolution of any one of the learned professions would require the hand of a master, who, like Darwin, would combine the capacity

for patient observation with philosophic vision. In the case of medicine the difficulties are enormously increased by the extraordinary development which belongs to the history of the present century. The rate of progress has been too rapid for us to appreciate; and we stand bewildered in a state of intellectual giddiness when we attempt to obtain a broad, comparative view of the subject."

Dr. Watson Cheyne,

in his address on Pathology, began thus: "Gentlemen, on such an occasion as this one is naturally tempted to look back on the history of pathology during the last sixty years. The most important advance has been the growth of bacteriology—a science which has not only led to most important practical results, but thrown a flood of light on the processes which go on in the body as a whole—the greatest of all advances, because so wide-reaching in the prophylaxis—*i.e.* the prevention—of disease, which is of great value in the treatment of diphtheria and rabies, and which may be properly regarded as a *prophylacteur* or *preventive* rather than a *curative* agent. In the case of diphtheria there can be no question [?] that the antitoxin is a most *curative* agent, and that, used in the early stages, it is almost certain to cut short the disease." Despite this confident prognostication, the Maidstone Town Council protested against its use in the Boys' School to render them *immune*, as since it was first used there had been several outbreaks in boys thus treated, plainly proving that it was a *provocative* rather than a *prophylactic.*

Mr. Christopher Heath,

in his address on Surgery, affirmed: "There never has been a time of greater activity in operative surgery (as statistics demonstrate), not only among hospital surgeons, but among general practitioners, who, thanks to anæsthetics and antiseptics,

now undertake operations of a magnitude which the hospital surgeons of the last generation would hardly have attempted. How are we to explain the apparent contradiction? First, I am afraid we must allow that a great many mistakes in diagnosis are made, or rather, that too often no attempt of diagnosis is made, but that an operation is undertaken 'to clear up the case.' That it generally does, no doubt, but not always to the benefit of the patient."

Dr. Edward Hamilton,

Professor of Surgery in the Royal Society of Surgeons, Dublin, and Surgeon in Ordinary to the Lord Lieutenant of Ireland, said: "The Victorian Age, in which we live, has been signalised by some most remarkable advances in all the arts and sciences. Human intellect and inventive faculties day after day gain fresh triumphs over matter, but in none have greater strides been made than in the art and practice of surgery."

Sir William Gairdner,

late Physician in Ordinary to the Queen in Scotland, in discussing the question, says: "The art of medicine is at this moment in a peculiar position. The day of orthodoxies is over; the day of real science is only just dawning. It is no longer possible to condemn a man, even by implication, for having ceased to believe what our fathers believed; but it is extremely difficult to state in general terms what we believe ourselves, and still more difficult to forecast the future and to lay the foundation of faith for our successors."

Here we may well exclaim, "*Cui Bono?*"

What has the world gained by all this amazing progress and these wonderful discoveries in the science of surgery and practice of medicine? What are the actual, tangible, visible results? What benefits have they conferred on the human race in respect of the cure of disease and the preservation and

prolongation of human life? In particular, what has it done to reduce the mortality in those diseases which are so cruelly painful and destructive to human life? Above all, what has it done for "the better (and in many respects, the more important) half" of the human race, which endures the greater share of the sufferings and sorrows incident to humanity—our mothers and wives, our sisters and daughters, towards whom all true men must cherish the most tender regard?

We gladly recognise the wonderful triumphs of the surgeon's art, and cheerfully acknowledge that in legitimate and absolutely necessary operations the advantages accruing from the use of anæsthetics and antiseptics are of transcendent value. Countless lives and limbs have been successfully saved that would have been sacrificed in the preceding dark ages—dark because destitute of these advantages. We also rejoice to admit that, so far as relief can be afforded to woman in times of deep anxiety and danger, the discovery and use of *chloroform* has been an *unspeakable boon*; but when we consider how it has induced and enabled her to undergo many perilous and profitless operations, we can only regard it as a *very doubtful boon*, for a careful examination of the statistics of the mortality attending these operations will clearly show that, subsequent to the introduction of this benign discovery, its employment (as also that of *antiseptics*) has been followed by a steady and ever growing increase in the rate of mortality, which only places in darker relief the disastrous and increasing failures that have sprung and still spring from treating *surgically* all *cancerous* diseases, external or internal (which are "constitutional diseases," and are so described in the Registrar-General's columns), instead of by *medicinal* measures.

It is sad to think, moreover, that by far the larger mortality from this sad disease obtains amongst females, though their total number is by no means so great as that of the sterner sex; yet from the earliest days of our Queen's reign this terrible scourge has fallen upon them more heavily than upon

men. Thus, in the first half-year of the Queen's reign there were but 355 male deaths to 873 females, a total of 1,228 (or say 2,400, including the previous half-year), being a mortality of 158 per million of the population then living (15,103,778), little more than half of the population living now (*viz.* 31,055,355); whilst in 1897, the latest year in which we can obtain accurate statistics, the mortality amounts to 9,578 males and 14,870 females, a total of 24,443, being a mortality of 785 per million, or almost five times that of 1837! A little later we furnish the painful statistics of this sad disease since the Queen ascended the throne, which the reader can study at leisure, from which it will be seen:—

1. That whereas in 1847, when *chloroform* was discovered, the total deaths from cancer were 4,586, this mortality had risen to 12,122 in 1877, when *antiseptics* were introduced by Lord Lister, and twenty years later, in 1897, with the super-added advantages of this other great discovery, the mortality had reached a total number of 24,443!

2. We further present an abstract of the total mortality during the several decades of the Queen's reign from July 1st, 1837, till 1854, during which period the mortality, undiscriminated fully as to males and females, amounted to 69,870. From 1855 to 1857 there were 5,435 deaths of males to 12,641 females; from 1858 to 1867, 22,809 males to 52,155 females; from 1868 to 1877, 49,671 males to 95,097 females; and from 1888 to 1897, 78,555 males to 130,974 females; making a dark total of discriminated deaths of 189,645 males and 361,819 females; or, including the 69,870 undiscriminated, a grand total of 621,334 deaths from this sad disease alone.

3. This mortality is all the more remarkable when it is considered that during the same period the mortality from all causes is steadily diminishing, and always has been less amongst females than males. Thus, out of a total mortality from all causes in 1847 of 423,304, there were 214,375 males (at the rate of 25·5 per thousand deaths) and 208,927 females (at the rate

of 23·9); whilst in 1897 the mortality among males was 280,211 (at the rate of 18·6 per thousand deaths), whilst among females it was but 261,276 (at the rate of 16·3); so that this makes the mortality from cancer all the more significant, for out of the 24,443 deaths in 1897 (a general mortality of 787 per million), 9,573 only were males (or 308 per million), whilst 14,870 were females (or 479 per million).

4. It should be observed also that since the introduction of *chloroform* in 1847, when the mortality stood at 75·5 per million males to 191·7 females, and had risen in 1877, when *antiseptics* were introduced, to 165 per million males and 329 per million females, as near as possible twice the number, in 1897 the mortality amongst males had risen to 308 per million as against 479 per million females. Evidently a remarkable "turning of the tables" has taken place! Whatever it may portend, the male sex had better take warning! Cancer is undoubtedly on the increase amongst men, chiefly attacking the *lip* (due to smoking—at one time it was the clay pipe, now the cigarette), the *throat* (due to ulceration and cauterisation internally, and tight shirt-bands and neck-ties, and the pressure of studs against the windpipe externally), the *stomach* (brandies and sodas and all manner of drinks, rather than of meats), the *rectum* (piles, and their treatment by cutting and burning); and so rapid is this increase in the last two decades, that it will not take long till the scales ot mortality shall be not only equally balanced, but the man's side will begin to sink.

We may state further that this sad disease is advancing, if not with equal rapidity, yet with alarming strides, in Scotland and Ireland and our distant colonies, and amongst our kith and kin in the United States. In proof of this I may mention that whilst in Scotland in 1866 the deaths from cancer were 1,327 with a population of 3,215,129 (at the rate of 412 per million), of which 403 were males and 924 females, in 1896, with a population of 4,186,849, the mortality was 2,983 (or 712 per million), of which 1,156 were males and 1,827 females.

During the past four decades there were total deaths, 2,946 males and 5,372 females (8,318 in all); males, 29·4 per thousand deaths; females, 53·6. The same increase, however, in the male mortality as exists in England and Wales has set in in Scotland also, for while in 1876 it was exactly one-third of the whole (1,695—565 males and 1,130 females), in 1896 it was as 1,156 is to 1,827.

In Ireland the conditions are more favourable, though a steady and startling increase prevails there also. Thus, in 1866, with a population of 5,522,942, there were 1,714 deaths, 723 males and 991 females (or at the rate of 310 per million—males 131, females 179); in 1896, with a population of but 4,560,378, a decrease of 962,564, there were 2,457 deaths (1,100 males, 1,357 females), a mortality per million of 549—a long way behind ours and that of Scotland, and more equally distributed, too, than in Great Britain, the male mortality being 265 and the female 284.

Discussing the most painful aspect of these statistics in an article to the *British Medical Journal* of August 8th, 1896, the plain unvarnished fact was singled out, that "whereas cancer in 1840 caused but 2,786 deaths (at the rate of 177 per million inhabitants then living in England and Wales), it caused in 1894 21,422 deaths (or 713 per million)."

Dr. Roger Williams,

of Preston, commented hereon as follows (and this is the frank testimony of a distinguished member of the surgeons' own household): "Thus the proportionate mortality is now more than four times greater than it used to be half a century ago. . . . In this respect its position was unique; no other disease could show anything like such an immense increase. It seemed certain that, if unchecked, cancer would ere long become one of the commonest diseases of modern communities. The subject was one that required thorough investigation on a larger scale

than could be undertaken by any single individual. It was a matter of national concern."

After such declarations, and these founded on such indisputable facts as are furnished by the nation's chief monitor, I am surely justified in affirming that the history of the treatment of cancer during the past sixty years by the regular profession is at once the greatest failure of the Queen's reign! And this darkness still grows deeper—it is a darkness that can be universally felt! In how many thousands, or rather, tens of thousands of homes is not this fell destroyer at this present hour firmly entrenched? The statistics of 1897 give a mortality of 24,443, a rate of 785 per million, nearly five times that of 1837! Yet 'tis only very recently that a special investigation of the subject has been proposed, such as Sir William Broadbent is now setting on foot with reference to the ravages of consumption, whose sad pre-eminence in olden times cancer bids fair soon to outstrip. As yet, however, no voice is raised in Parliament to ask that a Royal Commission should be issued to grapple with this alarming state of things, which is rapidly undermining the health and happiness of the British Empire.

To take Melbourne as a specimen of our colonial cities, enjoying all the advantages of modern sanitation and surgical skill, the records in the Government Statistical Office at Melbourne supply the following startling facts. That whilst in 1861—as early as we can find any trustworthy record—there were 19 deaths per hundred thousand of the population—*i.e.* one out of 5,402, then living—in 1871 there were 25, in 1881 there were 40, and in 1891 there were 60, or one out of every 1,640 of the population; and if we had the record for 1897, I am persuaded the returns would reach 78, and so bring the mortality up to a level with our own. And as it is growing in Victoria, so also is it in South Australia—17·8 per hundred thousand in 1871, 36·6 in 1881, and 49·4 in 1891; so also it is in New South Wales, Queensland (somewhat

slower), Tasmania, and New Zealand. Indeed, in one single decade in New Zealand, some twenty or thirty years ago, whether due to inaccuracy of registration or a pestilential outbreak of the disease, it jumped from 24 to 48, thus doubling its mortality in ten years! What it has reached now I am unable to write; but I can easily believe that in respect of mortality this healthy country is not one whit behind the Mother Country.

The other day a distinguished American surgeon, speaking of the unparalleled advance of this disease in the United States, in comparison with other diseases, declared excitedly: "Unless we solve this problem of cancer soon, it will destroy our whole population."

WHAT DOES ALL THIS SIGNIFY?

If these statistics and statements founded upon them possess any value, they not only impeach but unmistakably condemn the *methods* adopted in the past by the medical profession for dealing with this one sad malady. For it is beyond dispute that, with a single exception, from the earliest accurate information available, the rate of mortality has steadily advanced year after year by a rapidly increasing ratio!

And what are these methods which have so signally failed?—as much so, as if the makers of our guns, or the builders of our ships, supplied the nation with guns that would burst and ships that might easily be sunk in the hour of deadly conflict, when a loud outcry would arise from John o' Groats to Land's End, and a universal demand be made for the immediate adoption of other and improved methods of meeting the country's foes, so that the further and needless destruction of our brave soldiers and sailors might cease at once and cease for ever! Now what is the prevailing method commonly employed, which is so culpably guilty of the sacrifice of so many precious lives of men, and still more numerous and equally precious lives of

women, and that, too, at the most important and useful period of their existence?

Unquestionably, it is the subjecting every tumour or new growth, however occasioned (the majority of them being accidental and removable by simple means), large or small, of short or long standing, simple or malignant, to the tender mercy of the surgeon's knife, the idea being (and it is confidently maintained, in the face of all evidence to the contrary) that by no other means can a new growth be got rid of effectually. This idea, urged unfortunately yet strongly, enlists the sympathy and the instinctive desire of every one thus afflicted on the side of the surgeon and his knife. Prior to 1847 and the introduction of anæsthetics, women (who are the most frequent sufferers, as the statistics clearly reveal, well nigh two out of every three cases being females) had to choose between enduring the disease and allowing it to run its slow and lingering course, or submitting to be strapped to the operating-table, and have their quivering limbs firmly held by strong hands, whilst the operation proceeded. Few comparatively had the courage then to face the terrible ordeal—probably not five per cent.; but now, with the possession of these marvellous agents which God has placed in the hands of men for legitimate and merciful purposes, most women become brave enough, nay, are forward to submit to operation, especially as they are for the most part assured that they will awake out of sleep freed for ever from their terrible enemy, or, at all events, placed in more favourable circumstances for the continued enjoyment of life.

No severer denunciation of the ordinary method of dealing with this sad disease could possibly be penned than that published by Mr. H. T. Butlin, about the time of the Queen's Golden Jubilee, in his work on "The Operative Treatment of Malignant Disease." Referring to irregular practitioners, satirically styled "*cancer curers*" by the medical profession, he says: "Making every allowance for errors of diagnosis, owing to which tumours that are innocent are treated as though they

were malignant, I cannot doubt that they achieve a greater proportional success than is obtained by orthodox surgeons. My reasons for this belief are not merely their own statements, or the greater popularity of their methods, and the general impression which prevails among a large section of the public that they are more successful than we are, but because we so seldom meet with their unsuccessful cases, compared with our own, although we are naturally, perhaps, inclined to make the most of them when we do meet with them." Now this is the frank admission of a distinguished and successful London hospital surgeon, and it must have required no ordinary candour to write a passage so humiliating to the profession of which he is a bright and shining light. We have his deliberately recorded opinion, in a work written for medical men, that notwithstanding long, intelligent experience by the best surgeons of by-gone generations, their efforts have had no better result, so far as this terrible disease of cancer is concerned, than to place their successors on a lower level than men at whom they freely fling the insulting epithet of *quack*. And Mr. Butlin is not alone among eminent surgeons in making equally astounding admissions.

Sir Jonathan Hutchinson,

in his "Archives of Surgery" (Vol. V., p. 193), writing on another subject, declares his "conviction that sufferers from *strangulated rupture* have now less chance of survival than they had forty years ago," and he ascribes this sad state of matters to the "neglect of *simple* means of *reduction* in favour of an *operation*, which kills forty per cent. of those who submit to it!"

But few speak and write so frankly and sympathetically on this subject as did

Dr. Roderick MacLaren

at the British Medical Association at Carlisle in 1896, who,

having confessed "we are now aware that the visible disease is but a fraction of the total," said, "if we have far-spreading disease, we must have sweeping removal." At another time, in another but similar connection, he added this candid *caveat*, and I would that it were more frequently acted on by those who heard it: "I do not think that we ought to suggest to any one that for the sake of a future good [anticipated, no doubt, and frequently promised] a patient shall undergo what may kill him at once."

OTHER METHODS.

There have been from time to time other and humaner methods advocated by eminent and isolated members of the profession, some of them comparatively free from pain, such as *compression* and *freezing* of the tumour, concerning which Sir Spencer Wells, who practised it with considerable success in his early years, later in life, when delivering the Morton Lecture in 1888, dismissed it with these few words: "The use of these methodical compressions, *which often did good*, has led to the modern *massage*, which has already done much harm." "Much harm" assuredly, if massage is ever employed in removing a solid malignant tumour! Other methods (as Fell's, and Pattison's, and nowadays American herbalists'), involving the endurance of considerable suffering while proceeding, but frequently followed by a remarkable prolongation and happy enjoyment of life, have had a brief day, and rarely a fair trial, owing to the decided preference which surgeons now manifest for the "sweeping removal" and apparently thorough process; owing also to the natural anxiety of the suffering to be delivered speedily (as they expect to be, and are for the most part assured they will be) by one fell swoop of the surgeon's knife, so that *removal by the knife* may be accounted as the universally accepted and practised method at the present hour.

Here, I think, we may ask, and are fairly entitled to demand an answer, *Do these operating surgeons themselves believe in the efficacy of this method?* This may seem an unkind question to ask, but are we not warranted in doing so? Are we not justified in both putting and pressing it? Beyond a doubt there are some who will unhesitatingly and perhaps indignantly reply in the affirmative, and we are asked to receive their testimony implicitly. Thus Dr. Hutchinson states that "great progress has been made in the successful treatment of the disease by operations in the earlier stages. It is a common belief, which adds despair to the sufferings of patients, that cancer will always recur. In an increasing number of cases, however," Dr. Hutchinson tells us that "early operations have been so effective that there has been no recurrence." We would like to see a few such cases after the lapse of a year or two.

More recently still the announcement has been made that Dr. Lambert Lack, one of the Honorary Surgeons to the Golden Square Throat Hospital, who has, like many others, been for a long time investigating the *cause* of this malignant disease, concludes that "cancer is always due to a particular injury to the basement membrane of mucous membranes and allied structures," and further, that acting on this knowledge he has actually produced cancer in some of the lower animals. Now it is by no means difficult to engraft a disease like this upon any animal by *inoculation*; but what the community wants is not a discovery how to *produce* cancer, but how to *cure* it, and it is time enough to cry "*Eureka!*" when he can point to cases, yea, even to "a single case of genuine cancer cured by sweeping removal." But as doctors differ, and as we are commonly influenced by the preponderating weight of authority attaching to distinguished names and wide experience, let me set forth the deliberately recorded opinions of some of the most distinguished members of the profession, both in years gone by and at the present day.

Dr. Mayo,

in his "Outlines of Pathology," wrote long ago: "After amputation of a schirrous breast under the most favourable circumstances I believe that in *ninety-nine cases out of a hundred* the disease returns."

The late Dr. McFarlane,

Professor of Medicine in the University of Glasgow, wrote: "The operation never arrests, but *almost uniformly* accelerates the progress of the disease."

Sir James Paget,

who has been recently taken from us, the Nestor of English surgeons, once uttered the following: "I am not aware of *a single case of recovery*, and as to the influence of an operation in prolonging life, I believe that the removal of the local disease makes no material difference in the average duration of life." And if some one will say, it is very long since Sir James held such views, I would point to the language which he deliberately used when delivering the first lecture in the Morton Lectureship eight or ten years ago before the Royal College of Surgeons. He began his lecture thus: "We may safely believe that Mr. Morton, in generously founding this lectureship, entertained the hope that it might lead to some practical utility, perhaps even to the finding of a method for either the prevention or the cure of cancer and cancerous diseases. I hardly need say that we have none yet! Where or how may we hope to find one? We are bound to search everywhere and in all ways. It is clear that, great as is the good that operative surgery may do when practised *with the greatest prudence* [the italics are ours], it does not do all we want. The disease returns even after *complete* removal of the diseased parts. All that is locally wrong may be removed—the local portion of the disease may be deemed cured; but something

remains, or after a time is renewed, and similar disease reappears, and in some form or degree is usually worse than the first. We might well be content if we could find a *medicine* as efficacious against *cancer* as *mercury* and *quinine* are against *syphilis* and *ague*, as the recurrence of these diseases are less, not more severe than the primary. Such an one we have not! Can it reasonably be hoped for? I can only commend the study to my juniors. It must be both *clinical* and *experimental*, and probably the latter will be the more fruitful." This is the latest word of the world's greatest surgeon, and in it we have the solemn verdict pronounced upon all old-time methods, "weighed in the balances and found wanting." Ten years have passed away since then, and this prince of surgeons is also gone, yet the discovery (at least on the part of the profession) is still in the future.

Sir John Simon,

formerly Consulting Surgeon to St. Thomas's and Medical Officer of Her Majesty's Privy Council, delivering a lecture on the subject of Cancer before the Midland Medical Society at Birmingham, said:—

"The men who within our times have theorised on the evolution of cancer have seen that surgical removal of cancer, whether by knife or caustic, is in general of no effect to cure the patient, often because of the presence of the disease in other parts of the body; often also because the disease recurs in or near the place of removal.

"In coming now to the *treatment of cancer*, I come to what I cannot but describe as hitherto matter for most painful contemplation. We practically have no treatment for cancer (in the sense of curative or preventive treatment) except such as consists in endeavouring, in selected cases, to extirpate it with knife or caustic. In regard to three-fourths of all cases, these are out of the question; and as regards the remaining fourth, what is the good which surgery can promise?

"First, it can promise a microscopical hope—a hope which, on the whole, is so small as to be scarcely distinguishable from despair—that the disease will be radically cured by the operation.

"Secondly, it can hold out hopes of palliation, sometimes the possibility that such real check will be given to the disease as may sensibly affect the duration and comfort of life."

Later on he adds:—

"It seems to me imperative, under the circumstances, that we should look about with all the best intellect of our profession to see if this state of the case cannot be amended." This, we trust, is the attitude of the profession now.

On another occasion, when lecturing on the subject, he contended that "unremitting efforts should be made to discover, either *within* or *without* the Pharmacopœia, some substance which will exercise a *remedial* influence over growths of a cancerous nature." Alas! this is treated as the occasional ebullition of a pious opinion, and is soon forgotten by speaker and hearers alike.

Still more recently one of our most distinguished surgeons in active practice, and now doing splendid work for his Queen in South Africa, discussing a kindred subject, came to the same conclusion. I refer to

Sir William MacCormac,

now President of the Royal College of Surgeons for the fourth time in succession. He was delivering the Hunterian Oration, in commemoration of the celebrated John Hunter, who did so much for surgery one hundred and thirty years ago. In addition to a crowded gathering of the Fellows and Members of the College, His Royal Highness the Prince of Wales was present. The subject was, "Hunter, the Founder of Scientific Surgery." Having fully sketched Hunter's remarkable career in relation to every department of surgery, he quoted with approbation John Hunter's brief allusion to

the subject of cancer, concerning which he remarked: "Of cancer, no cure has yet been found, for what I call *cure* is an alteration of the disposition and the effects of that disposition, and not the destruction of the cancerous parts." Sir William simply added, and he might well do so regretfully (but what a volume of honest confession the few words contain), "and to-day, we can only, alas! endorse what Hunter said."

And but the other day

Sir Charles Cameron,

in the course of his address at the inaugural meeting of the newly formed Cancer Investigation Society, over which he presided, observed: "I need not say we know of no cure as yet for this sad disease."

Very recently there has been issued from the Press a remarkable book upon this very subject by

Dr. Herbert Snow,

Surgeon to the Cancer Hospital, Brompton, entitled, "Twenty-two Years' Experience in the Treatment of Cancerous and other Tumours," in which, after setting forth the figures, etc., representing the increase of mortality from 1864 till 1895 (from 355 per million in 1864 to 755 in 1895), which I have supplemented by a few additional dates, earlier and later, for my own purpose, he proceeds to make the following comments, which speak for themselves! Indeed, were I to make them so bluntly and fearlessly, I should be charged with the bitterest malice against the profession, and described as influenced by the basest motives! This cannot be imputed to Dr. Snow. Whether he has himself discovered a more excellent way than that which he virtually condemns, and in which he has himself walked for twenty-two years, remains to be seen, but meanwhile matters cannot rest where they are. They must either *mend* or *end*! At all events, if ever there

existed a justification for the issuing of a Royal Commission (which I heartily desire to see) to investigate this sad subject in all its bearings and aspects, it is supplied here. But I will let this distinguished surgeon speak for himself and the profession from the high vantage-ground of twenty-two years' unparalleled experience at the Cancer Hospital, Brompton:—

"Every medical practitioner knows that the parts or organs which are most prone to cancer, and which furnish by far the larger proportion of the cases, are those which fall under the treatment of the operating surgeon."

Then follows the astounding statement:—

"All, again, who with adequate opportunity have studied malignant disease in the light of modern pathology, concur in recognising *the perfect and permanent curability* [the italicising is mine] of cancer in such parts or organs, by the methods of truly scientific surgery, employed under *certain conditions*."

Why, then, do we never see perfect and permanent cures amongst allopaths? And what was the meaning of the confession of the President of the Test Committee at its formation, when I urged the propriety of a *comparative* test? "We acknowledge," said Sir Morell Mackenzie, "that *all* our patients *die*. We want to see if you can *cure* a single *case*."

"In the existing popular ignorance of cancer science," Dr. Snow proceeds, "those conditions are not attainable in every single instance, but in the *great majority* they *assuredly are* [?]. And it is therefore obvious that this *huge aggregate of yearly deaths* signifies nothing less than imperfect acquaintance with technique by *most of those* who are *entrusted* with cancer operations.

"The subject is a peculiarly painful one from many points of view. If the fruits of long reflection thereon be here too plainly set forth, its importance to the public weal, the continually increasing proportions of the evil, above all, *the power of the vested interests which bar improvement* [here

again the italics are mine], must be pleaded in excuse. The principal impediments to progress lie in the medical profession itself.

"The attempts of the Cancer Hospital authorities by the institution of an annual course of lectures and by other means to supply the deficiency have been largely negatived by the divorce of that institution, with the other special hospitals, from any recognised scheme of medical education.

"From his first entrance on his curriculum, the student imbibes the notion that cancer is a perfectly simple affair, involving educationally little more than the identification of a few microscopic slides. Its pathology presents nothing worthy of exclusive study; its clinical features are easily grasped. For treatment drugs are useless. Surgical operations are little better, but must be resorted to as a matter of *routine* [!]. Their results will be mostly unsatisfactory, as a matter of course. Any tyro is competent to perform them.

"That is the gist of modern teaching and of consequent medical public opinion. The fact is notorious."

Now follows a still more astounding confession :—

"*By far the larger majority* of cancer operations are *now performed by men wholly unqualified*, either by early education or by subsequent study, to undertake them. Only long dealing with these cases reveals the importance of the *minute details*, requiring to be varied or adjusted *in each single instance*, on which ultimate success depends.

"Herein lies the secret of this daily increasing mortality, for which the *attitude of the leading medical schools appears mainly responsible.*

"If I do not greatly err, this question of progress in cancer science is intimately connected with the numerous other reforms for which the profession now more or less blindly gropes, and which can hardly be effected without a Royal Commission of enquiry upon the entire working of the Medical Acts.

"Such are, first and foremost, the renovation of that peculiar

mediæval anachronism, the College of Surgeons. [*O tempora! O mores! Et tu quoque*, Herbert Snow!]

"Reform of the College of Surgeons is the practical question lying at the root of all the evils which afflict the profession."

And Dr. Snow sums up all his conclusions thus (and I heartily concur in each of them):—

"I respectfully submit that the *yearly increasing ravages of cancer*, as indicated by the appended returns [pp. 22–25], *constitute an extraordinary danger*, demanding *extraordinary measures* for their curtailment or suppression; *that the community should hardly*, as now, *meet the trouble* passively *with folded hands*; that *action by the State is imperatively indicated.*"

In the following pages I shall furnish from the Registrar-General's Reports, statistics of the increasing mortality from cancer, not only for England and Wales, but also for Scotland and Ireland.

AGGREGATE MORTALITY FROM CANCER IN ENGLAND AND WALES, AND RATIO PER MILLION OF POPULATION, DURING THE QUEEN'S REIGN (1837–1897).

Year.	Males.	Females.	Total Deaths.	Per Million.	Population.
1837 (July 1 to Dec. 31)	355	873	1,228 (Say, 2,400 for whole year.)	158	15,103,778
1838	620	1,828	2,448	160	15,287,699
1839	660	2,031	2,691	173	15,514,255
1840			2,786	177	15,730,813
1841	868	1,878	2,746	174	15,929,492
1842			2,941	182	16,130,326
1843			3,200	190	16,332,228
1844			3,500	211	16,535,174
1845			3,860	230	16,739,136
1846			4,000	236	16,944,092
1847	1,298	3,288	4,586	267	17,150,018
1848	These years have been grouped by the Registrar-General.		4,826	277	17,356,882
1849			4,807	273	17,564,656
1850			4,967	279	17,773,324
1851	10,688	26,196	5,318	295	17,982,849
1852			5,477	306	18,193,206
1853			5,663	313	18,404,368
1854			5,826	317	18,616,310
			69,870		
1855	1,825	4,191	6,016	325	18,829,000
1856	1,790	4,069	5,859	311	19,042,412
1857	1,820	4,381	6,201	322	19,256,516
	5,435	12,641	18,076		
1858	1,969	4,464	6,433	334	19,471,291
1859	1,963	4,713	6,676	342	19,686,701
1860	2,100	4,727	6,827	348	19,902,713
1861	2,180	5,096	7,276	366	20,119,314
1862	2,256	5,140	7,396	368	20,371,013
1863	2,311	5,168	7,479	369	20,625,855
1864	2,459	5,658	8,117	385	20,883,889
1865	2,389	5,533	7,922	372	21,145,151
1866	2,532	5,761	8,293	385	21,409,684
1867	2,650	5,895	8,545	392	21,677,525
	22,809	52,155	74,964		

Year.	Males.	Females.	Total Deaths.	Per Million.	Population.
1868	2,743	6,137	8,880	404	21,948,713
1869	2,933	6,381	9,314	419	22,228,299
1870	2,971	6,627	9,598	426	22,501,316
1871	3,060	6,631	9,691	424	22,788,594
1872	3,228	6,765	9,993	432	23,096,495
1873	3,387	7,118	10,505	448	23,408,556
1874	3,470	7,541	11,011	464	23,724,834
1875	3,648	7,766	11,414	474	24,045,385
1876	3,747	7,852	11,599	475	24,370,267
1877	3,988	8,134	12,122	490	24,699,539
	33,175	70,952	104,127		
1878	4,207	8,457	12,664	505	25,033,259
1879	4,183	8,616	12,799	504	25,371,489
1880	4,461	8,817	13,278	516	25,714,288
1881	4,611	8,931	13,542	520	26,046,142
1882	4,685	9,372	14,057	534	26,334,942
1883	4,967	9,647	14,614	549	26,626,949
1884	5,346	9,852	15,198	563	26,922,192
1885	5,195	10,065	15,260	572	27,220,706
1886	5,754	10,489	16,243	590	27,522,532
1887	6,262	10,851	17,113	615	27,827,706
	49,671	95,097	144,768		
1888	6,284	11,222	17,506	631	28,136,258
1889	6,891	11,763	18,654	656	28,448,239
1890	7,137	12,296	19,433	676	28,763,673
1891	7,294	12,823	20,117	692	29,081,962
1892	7,547	12,806	20,353	690	29,401,898
1893	7,908	13,227	21,135	711	29,725,358
1894	8,077	13,345	21,422	713	30,052,397
1895	8,628	14,317	22,945	755	30,383,047
1896	9,216	14,305	23,521	765	30,717,355
1897	9,573	14,870	24,443	787	31,055,355
1898	9,932	15,264	25,196	802	31,397,078
	88,487	146,238	234,725		
Total discriminated.	199,577	377,083	576,660		
Not fully discriminated.	1837–1854		69,870		
	Total		646,530		

TOTAL DEATH-RATE FROM ALL CAUSES IN ENGLAND AND WALES AT EACH TENTH YEAR.

Year.	Population of England and Wales. Mid-Year.	Total Deaths. All Causes.	Per 1,000. All Ages.	Males.	Per 1,000. All Ages.	Females.	Per 1,000. All Ages.	Deaths of Males to 1,000 Deaths of Females in Equal Numbers.
1837	15,103,778							
1847	17,150,018	423,304	24·7	214,375	25·5	208,929	23·9	1,069
1857	19,256,516	419,815	21·8	212,356	22·6	208,929	21·1	1,071
1867	21,677,525	471,073	21·7	242,588	23·0	228,485	20·5	1,118
1877	24,699,539	500,496	20·3	260,567	21·7	239,929	18·9	1,145
1887	27,827,706	530,758	19·1	272,137	20·2	258,621	18·1	1,116
1897	31,055,355	541,487	17·4	280,211	18·6	261,276	16·3	1,141

TOTAL DEATHS FROM CANCER AT EACH TENTH YEAR.

Year.	Population of England and Wales. Mid-Year.	Total Deaths from Cancer.	Per Million.	Males.	Females.	Per Million.	
						Males.	Females.
1837	As above (July 1 to Dec. 31)	2,400 for whole year.	158	689	1,711	93	222
1847	Chloroform discovered	4,586	267	1,298	3,288	154	376
1857		6,201	322	1,820	4,381	193	445
1867		8,545	392	2,650	5,895	251	531
1877	Antiseptics introduced	12,122	494	3,988	8,134	331	641
1887		17,113	616	6,262	10,851	463	757
1897		24,443	787	9,573	14,870	636	929
*1898							

N.B.—At this present time, one male out of every nine and one female out of every fourteen living who has attained the age of thirty-five dies eventually of cancer.

* According to the Registrar-General's latest report there were 25,196 deaths from cancer in 1898, the highest rate ever recorded. Among males the cancer death-rate was 653 per million, and among females it was 943 per million.

TOTAL DEATHS FROM CANCER DURING THE QUEEN'S REIGN.

Years.	Males.	Females.	Total.
1837–1854	Not fully discriminated.		69,870
1855–1857	5,435	12,641	18,076
1858–1867	22,809	52,155	74,964
1868–1877	33,175	70,952	104,127
1878–1887	49,671	95,097	144,768
1888–1897	78,555	130,974	209,529
	189,645	361,819	621,334

MORTALITY IN SCOTLAND AND IRELAND AT FOUR SUCCESSIVE DECADES.

SCOTLAND

Year.	Population.	Males.	Females.	Total.	Per Million.		
					Total.	Males.	Females.
1866	3,215,129	403	924	1,327	412	263	575
1876	3,552,183	565	1,130	1,695	477	331	611
1886	3,885,155	822	1,491	2,313	595	439	741
1896	4,186,849	1,156	1,827	2,983	712	571	844

IRELAND.

Year.	Population.	Males.	Females.	Total.	Per Million.		
					Total.	Males.	Females.
1866	5,522,942	723	991	1,714	310	267	351
1876	5,227,544	756	944	1,700	325	293	348
1886	4,857,119	894	1,135	2,029	418	371	454
1896	4,560,378	1,100	1,357	2,457	549	485	591

THE LATEST DELIVERANCES OF THE PROFESSION.

Still more recently there has issued from the Press a special number of *The Practitioner*, one of the best journals of practical medicine and surgery of the old school at the present day, edited by Mr. Malcolm Morris. The subject is "Cancer." I turned to this with deepest interest, that I might read the very latest words of the ablest men of the orthodox persuasion on this very momentous subject; and I cannot do better than permit these accomplished surgeons to speak for themselves—as I have allowed Dr. Herbert Snow to speak for himself. Obviously Dr. Snow had been engaged already in the preparation of his own book, or otherwise his very extensive experience would have been invited and recorded here.

In an introductory chapter the editor explains "that the object aimed at in publishing this 'Special Cancer Number' is simply to present in an accessible form and within a convenient compass a summary and judicial estimate of all that is known about cancer and of all that can be done for the relief of its victims. It has been the endeavour of the editor to make the treatment of the subject as complete as possible. The question of the increasing prevalence of cancer is dealt with by two writers—one, a recognised authority on vital statistics in this country, who has given special attention to the cancer returns; the other, a leading American surgeon, who is director of a State-supported laboratory for the study of the disease. In short, the cancer question has been considered from every side. Even the 'quacks' have not been forgotten! The editor ventures to hope that the number may be accepted as a compendium, if not exactly of everything knowable, at any rate of *everything known about cancer*.

"The editor wishes it to be clearly understood that he has no idea of starting a movement for the suppression of *cancer*,

such as has been initiated with good prospect of success in regard to *tuberculosis.*" [And why not? If it be a good thing to endeavour the suppression of "phthisis," which has accounted for the destruction of hundreds of thousands of our fellow-countrymen and women in the heyday of their years, and what should be their prime, surely it is an equally desirable and incumbent duty to take the same action with reference to the cruel and increasingly destructive disease of "cancer." The former should certainly be done, but the latter should not be left undone. The editor, however, explains his own reason for this, as follows. It may be the right one, but it will not, I think, be deemed either sufficient or satisfactory.] "In the present state of our knowledge the efforts of an association for the prevention of cancer would be as purposeless and as futile as the wanderings of Don Quixote in search of chivalrous adventure. And we should be as poorly equipped for such a a campaign as the knight of La Mancha with his pasteboard helmet and his bare-boned charger. The movement for the prevention of 'tuberculosis' finds its justification in the reasonable hope there is of success; and this hope lies in the fact that the cause of the disease is positively known, and the means of counteracting its operations are in our hands. The case is altogether different as regards cancer. Its cause is still hidden, or at least too uncertain to be treated, in the practical sphere, otherwise than as an unknown quantity. Some of the best investigators have for years past been striving to wrest this secret from Nature. But life is short, and the labour needed for the solution of the problem is long and arduous. If a collective investigation of the ætiology of cancer could be organised on a sufficiently large scale, the prospect of ultimate success would be greatly increased. There is too much individualism in scientific work, and the result is not only waste of power, but actual loss of *knowledge, which is allowed to die with its discoverer because he could not get a hearing for it,* or *because it failed to find favour in the eyes of some superior*

person. [The italics are mine.] With a proper organisation of research on definite lines by a number of investigators working together to a definite end, there would be little or no leakage, and success would be merely a matter of time."

Why, then, in the name of God and Humanity, is not this "collective investigation" begun at once?* Clearly, if success in this research were merely a matter of time, or dependent on proper organisation by a number of investigators on definite lines working together to a definite end, a terrible guilt must lie at the door of thousands of able surgeons throughout the world, who have, alas! unbounded opportunities to study the causes and counteract the operations of this fell destroyer of the brightest and best of our sons and daughters.

Having discussed the various causes suggested as originating this disease, and answered the questions, "Is it a parasitic disease? Is it an infectious disease?" he proceeds to ask an unnecessary question, one would suppose—*viz.* "Is it increasing?" He replies by quoting Professor Roswell Park, of New York, who alleges, in his recent work on "The Frequency and Nature of Cancer," that "it is the only disease tabulated which shows a steadily progressive increment by years, and even month by month. It would appear that we are doomed before long to live under the sign of 'cancer'." He makes the startling prophecy that if for the next ten years the present relative death-rates are maintained, in 1909 there will be more deaths in the State of New York from cancer than from consumption, small-pox, and typhoid fever combined. Having discussed the increasingly carnivorous habits of the population, and ridiculed the '*tomato*' theory of its origin, he makes the following extraordinary suggestion: "A more rational explanation of the increase of cancer is that it is the necessary penalty of sanitary

* We rejoice to know that a beginning in this direction is about to be made on a limited scale at Middlesex; and we only wish, and we do so heartily, that remedies may be employed, under the supervision of the special staff, which *have yielded*, beyond all question, *extraordinary results.*

progress [!]. More people now live to an age at which they are liable to become the prey of cancer than in the brave old days when there were no drains and the fear of the microbe was unknown." Surely after this we should put back the clock! If this be true, of what advantage to us are our improved sanitary laws, though it is mainly to these, as every intelligent reader of statistics knows, that we are indebted for the stamping out of such terribly destructive diseases as typhus fever, cholera, and small-pox, and a great abatement in the mortality of many other alarming forms of disease. To the question, "Can cancer be cured?"* he replies: "A few years ago this question could only have been answered with a despairing negative. But now, as may be learnt from Mr. Watson Cheyne's paper, a far more satisfactory answer can be given. Surgery can eradicate cancer in certain situations, whilst in a large number of cases it can give the patient a longer lease of fairly comfortable life." Why, then, does it not do so?

Even in cases which are "past all surgery," Dr. Coley, of New York, still holds out a hope of relief from the use of the mixed toxins of "erysipelas" and "bacillus prodigiosus," as described in his paper on "The Operative Treatment of Cancer," published and referred to later on. Although in the hands of other surgeons the treatment has not been so effective as in those of Dr. Coley himself, "in a disease so desperate as cancer, a doubtful remedy is better than none, and we are not justified in neglecting any chance, however slight it may appear. By doing so we only deliver the unfortunate sufferer into the greedy hands of the quack." But, I ask, if the so-called quack can set before the eyes of the faculty scores of cases that have been *cured* by simple remedies, which *invariably* yield great relief where they can-

* Dr. Massey, of Ohio, Mass., claims to have cured nine cases out of ten by injecting, by the aid of electricity, the nascent *salts of mercury*; and our own Dr. Hutchinson protests that "complete and radical removal at an early stage will cure nearly 80 per cent. of all cases." Doctors do differ!

not cure, can anything justify not merely the neglect but the determination on the part of the profession to do nothing more than cry "Quack! Quack!" and refuse to investigate either the remedies employed or the results obtained? Those who are the victims of this disease must enquire for themselves.

I shall not deal at any length with the chapter on "The Statistics of Cancer," or on Dr. Newsholme's attempt to explain away to a considerable extent the alarming cancer death-rate, alleging that "imperfect diagnosis and inaccurate certification of death may account for the inclusion of many cases" in which death was due to other causes. I will permit him to speak for himself in his two closing paragraphs:—

"But although I have maintained that there has probably been no real increase in mortality from cancer during the last forty years [!], it is none the less true that cancer is among the most deadly diseases on the Registrar-General's list. True, it kills annually only about three-eighths the number claimed by phthisis, owing to the circumstance that, unlike phthisis, it is rare before middle life. It is, however, between three and four times as fatal as typhoid fever, and has a larger annual death-roll than either measles or whooping-cough, which have a much larger population for their operations.

"Cancer causes about 6 per cent. of the total deaths registered among males at ages over forty-five, and over 7 per cent. of the total deaths registered among females at ages over forty-five. Were the real facts known, it would be found that the number of deaths due to cancer is even greater than these figures indicate. Hence, any researches which will elucidate the origin of the disease, and afford trustworthy indications for its prevention, would be welcomed with gratitude by suffering humanity. With these preventive means still undiscovered, it is undesirable to increase the public alarm by leading them to suppose that statistics justify the conclusion that cancer is becoming increasingly prevalent." [? !]

The succeeding article, entitled "A Further Inquiry into the

Frequency and Nature of Cancer," by Roswell Park, M.D., Professor of Surgery, University of Buffalo, New York, is pitched in a different key-note from the preceding, and, indeed, might be regarded as a reply to its main contention. The first object of this paper (unlike the last) is to emphasise the *ever-increasing mortality* rate in New York State from cancer:—

"With regard to the increasing mortality rate, it would take up too much space if I were to give tables which have been carefully prepared from the returns of the State Board of Health, but the principal facts brought out can be briefly indicated as follows. These tables are of themselves a convincing argument in favour of collective study, and by public aid, as to the causes of cancer, since they show, with regard to another disease, whose cause used to be equally unknown, that since the discovery of the peculiar organism to which it is due, its mortality rate has steadily declined. I allude, of course, to consumption. Since its cause has been known, intelligent and properly directed efforts have produced a very marked decrease in its ravages. On the other hand, the death-rate from cancer is still increasing, not alone in New York State, but apparently in all parts of the world. There is, furthermore, every reason to infer that the increase will undoubtedly continue until its minute causes are positively determined [?]. So far as we have been able to learn, cancer is now the only disease which is steadily on the increase. In England and Wales, where, for instance, most careful statistics are kept, the cancer death-rate has risen from one out of 5,648 of population in 1840 to one out of every 1,306 of population in 1896; that is, in fifty years the proportion has increased nearly five times. All over this country the increase is quite as alarming; while the figures pertaining especially to New York State are equally significant, and quite incompatible with its increase in population. Thus, for instance, in 1887 there were in New York State 2,363 deaths from cancer and 11,609 from consumption. In 1898 there were 4,456 deaths from cancer, and only 12,552 from consumption.

This increase in cancer mortality is certainly *not due to improvements in methods of diagnosis*, but rather is the reverse the case, since many cases which were formerly diagnosed as cancer are now properly classified where they belong in other lists. In none of the other diseases tabulated by the State Board of Health, nor in any Government Reports, has there been such an immense increase as in cancer. It is the only disease tabulated which shows a progressive and steady increment by months and by years."

What a pity the previous writer had not seen this chapter! He concludes:—

"A careful study of all these tables permits one to make the following startling prophecy: if for the next ten years the relative death-rates are maintained, we shall find that ten years from now—*viz.* in 1909—there will be more deaths in New York State from cancer than from consumption, small-pox, and typhoid fever combined."

The next writer, Mr. Alfred Haviland, contributes a most valuable paper on "The Medical Geography of Cancer in England and Wales." So far back as 1868 he had made a special investigation of this subject, especially as during the decennial period 1851–1860 "cancer was more than twice as fatal among *women* as among *men* (the annual death-rate at all ages to every ten thousand having been 1·94 among *males* and 4·33 among *females*)."

No student of modern times had laboured more laboriously and successfully in ventilating this important subject, and those who wish to understand the peculiar habitat of this sad disease will find in his wide research all the light which modern science can shed, if not upon the real causes, at all events upon one of the important factors of this alarming increase. He began these researches more than thirty years ago, to investigate the reasons why phthisis, heart disease, and dropsy prevail more largely in some districts than in others, and hit on the happy idea of illustrating these differences by colouring

more or less deeply those places on the map where Dr. Farr had pointed out in his statistics a larger or a less mortality prevailed.

So impressed were the Medical Society of London with the importance of this original idea as to its bearing upon the selection of the best spheres for human residence that they invited Mr. Haviland to prepare a similar map, setting forth the geographical distribution of cancer. After a prolonged investigation he presented his results in a map setting forth in colours the scale of mortality attaching to each of the six hundred and thirty registration districts into which England and Wales have been divided. "The scale by which the colouring of the map was regulated represented six degrees of mortality from cancer. The three *above* the average of the country (4·33) were coloured blue in three shades, the *highest* mortality being coloured the darkest; and the three *below* the average were coloured *red* in three shades, the *lowest* mortality being coloured the darkest; thus the degrees rose from below 2·33 to 7·33 and above. The colours *red* and *blue*, in different shades to indicate the several degrees of mortality, were adopted as a help to the memory of the medical man, who will recognise the fitness of scarlet to represent bright *arterial* blood, full of health and life—*low mortality*; whilst *Prussian blue* reminds us of effete, used-up *venous* blood as a fit representative of disease and death—*high mortality*.

"The first great fact that calls attention is that nearly the whole of Wales and the north-west portion of England are coloured *red*, which indicates a low amount of mortality from cancer over this wide area; coincident with this is the fact that these parts of England and Wales belong geologically to the oldest formations—namely, the Silurian and carboniferous—and physically, include the highest and best drained mountainous districts in the country."

"The next great *low* mortality, or *red* group, is to be traced from the south to the north-east; it extends northwards from

the Isle of Wight, through the greater portion of Hampshire, crosses that part of Wiltshire where the River Kennet rises, and passes still in a northerly direction to the Cotswold Hills, in Gloucestershire, where the Thames has it sources; and then turns eastwards to pass through Oxfordshire, the south-west of Northamptonshire, Bedfordshire, Hertfordshire, Cambridgeshire, and Norfolk. This area includes the chalk hills of Hampshire, Wiltshire, Oxfordshire, Buckinghamshire, Bedfordshire, Cambridgeshire, Suffolk, and Norfolk; and is flanked to the west and north-west by the oolitic limestone series of Gloucestershire, Oxfordshire, and Northamptonshire.

"On the other hand, if we trace the boundaries of the *high* mortality, or *blue* districts, we shall find that, instead of occupying the elevated portions of the country, these groups are, almost in every instance, seen to surround the great rivers after their full formation, and when they have reached the low-lying valley land, where the districts through which they pass are liable, after heavy rains or sudden thaws, to serious floods. Again, we shall find that the sites of these cancer-fields are mostly composed of the later formations. Take, for instance, the cancer-field of the Thames, which is almost co-extensive with that large tract of the lower eocene called the London clay; the East Yorkshire field, which is traversed by the large rivers forming the Humber—a district we know to abound in alluvium and the recent deposits of the over-flowings of its great rivers. In Suffolk the riparian districts of the Stour—Thingoe, Bury St. Edmunds, Stow, Cosford, and Sudbury; and in Norfolk those which are watered by the Yare, the Wensum, and the Bure water are characterised by a high mortality and form lesser cancer-fields."

His general conclusions are:—

"1. That the districts having the *highest death-rates* from cancer among females were invariably associated with seasonally flooded areas traversed by, or in close propinquity to, fully formed rivers.

"2. That, geologically, these *high* mortality districts were characterised by alluvium and subsoils of clays of every variety of age and formation.

"3. That the districts having the *lowest* death-rates from cancer were situated on elevated land, where the drainage was good, and the physical features of the country such as to preclude the possibility of floods; where rivers derived their sources, and where, in fact, they were not fully formed."

Those who desire to study this matter fully should provide themselves with this most instructive and valuable paper. I would only remark, in dismissing it, that the ten years to which Mr. Haviland's first paper applied was the first decade in which chloroform had come into universal use, and its bearing upon the question of increasing mortality I have already commented upon.

The closing section of this special cancer number discusses the subject of "cancer curers." It is evidently an editorial wind-up of the whole subject—a rapid survey of the ultra-professional treatment of this sad disease. It opens with a vein of sarcasm; but all the same it utters in almost the same breath some sober words of truth. These are happily combined in the very opening paragraph. "Cancer," it avers, "is the 'Darkest Africa' on the map of medicine; hence, naturally, it is the happy hunting-ground of quacks." This is the irony! Now for the honest confession, which, they say, is good for the soul. "As the healing art can, as a rule, offer sufferers nothing better than the doubtful remedy of the knife, it is no wonder that many should prefer the hope, delusive though they *often* [not always] know it to be, held out to them by the quack." Now, sufferers and their friends are not all so silly as they are here represented; they do not go to quacks because they have heard of their *failures*, but rather because they have heard and known of their *successes*! But evidently the doctors are not agreed as to the results obtained and obtainable by these cancer curers (see Mr. Butlin's opinion, p. 11).

After reviewing the methods that had been employed with

"*varying* success" by Drs. Fell and Pattison—yet admittedly "with *success*," as I can testify with reference to the practice of the latter some forty years ago—and recounting the many misdeeds of the ancient and modern herbalists, he comes down with a very heavy hand upon the alleged successful treatment of late years by the remedies of Count Mattei, which differ materially from all those previously considered, in that there is no longer the employment of caustic and poisonous pastes, designed and intended to destroy the diseased tissues, but remedies so simple that even a child may use them with impunity. He writes:—

"Of the Mattei treatment, the latest, and in some ways the worst fraud among cancer curers, there is no need to say much. The bottled electricity of the Italian quack, whether blue, green, or yellow, was shown to be nothing but water [see p. 85]. The caustics, at any rate, did in many cases destroy the cancer though they destroyed the patient with it; but the Mattei remedies could not destroy anything—except the unfortunate patient's faith in them. The momentary vogue of the superstition illustrates one of the dangers of running after every new thing, which is the chief feature of our latter-day journalism, so accurately described by Matthew Arnold as 'feather-brained.' An enterprising journalist sees possibilities of copy in the thing, and with characteristic irresponsibility proceeds to boom the affair. Then, 'a leader of society'* takes it up with hysterical enthusiasm and makes it fashionable; and for a time the craze flourishes on the folly of that particularly silly class of the population, the 'smart' people, who are well described by Warburton's phrase the, 'better vulgar.' Challenges are made to the profession, which knows exactly what the method is worth, and therefore resolutely declines to trouble itself about the matter. What is the use? When a chance is offered of putting the method to a scientific test, its champions either refuse it, or, if pressed, retire ingloriously from the field."

* See Lady Paget's article in "The Cancer Controversy."

This characteristic paragraph is a sample of the way in which the profession usually deals with any proposed new method of treatment which does not emanate from its own ranks.

But, first, it bears an unintentional testimony to the *innocuous* treatment of the Count. It alleges "it can destroy nothing."

Then, secondly, it makes an allegation, which is easily made, but utterly false—*viz.* that "it does destroy the faith of its patients." Where is the evidence? Let the thousands enjoying life and health to-day, who but for this treatment had been long since in their graves, bear witness, as they are ready to do.

Thirdly, it makes two additional allegations, equally untrue—*viz.* that the principal users of the remedies, here characterised as "their champions," refused an opportunity of putting the treatment to a scientific test, and when pressed, retired ingloriously from the field. So far from this, the challenge was made on their behalf, and when accepted, they entered upon it cordially and hopefully; but when the committee, seeing for themselves at the end of a *twelvemonth* that the patients gave no sign of retrogression or death, they violated their own agreement in a most deliberate manner; and the doctors conducting the treatment withdrew at once from their relation to the committee, but stuck by the patients. till, after the lapse of *eight or nine years*, they all passed away, testifying, as they did to the very close of their lives, their appreciation of and deep gratitude for all that had been done for them.*

* *Three* of these patients lived three years from the commencement of their treatment (one dying from *acute poisoning*, and another from successive attacks of *influenza* and *bronchitis*, in a time like this), whilst *two* (and one of these, one of the worst cases at the commencement of the investigation) lived over six years, and during the greater part of these years discharged their home duties with diligence and efficiency. Their friends live still, and are able and willing in every instance to bear trustworthy and intelligent testimony.

AMONG THE DOCTORS AT HOME.

Fell, Pattison, Robinson.

FROM time to time there have arisen from out of the profession itself able men who, by the use of external measures and internal medications, have effected many extraordinary cures, such as Drs. Fell and Pattison and Robinson in past years, but they could not impress the age, nor gain the ear of their medical *confrères*. And they passed away unobserved, and their special knowledge and treatment perished in a large measure with them. Again (emanating also from within the ranks of the profession, and to my mind the most distinguished physician of the present or any previous century),

The Immortal Hahnemann

pointed out the medicines which could exert a powerful influence over this disease, and some of his followers have succeeded in obtaining striking results from their use; but his followers are so few in the United Kingdom, compared with allopaths, and their range of hospital experience so limited, and they are besides so strenuously opposed and overshadowed by their more popular *confrères*, and so unreasonably excluded from all the national colleges and hospitals, that they have no good opportunity of gaining the public ear, and exhibiting the value of medicines employed homœopathically in this or similarly destructive diseases. One of the most practical authors has summed up their experience in this wise: "Treatment cannot be commenced too early, for *cure* involves destruction or elimination of the morbid tendency. Whether or not there is any

remedy known which is capable of this, is a disputed point. Many vaunted remedies have disappointed those who trusted in them, while others have failed in some cases, though they were useful in others. We can assert, however, from our own experience in numerous cases [and I myself had this self-same experience in several cases in past years with *homœopathic* remedies], that the sufferings attendant on this malady may be greatly alleviated, and life considerably prolonged, by the use of such remedies, even when it is impossible to effect a cure." *

Last of all, and outside the pale of the regular profession,

COUNT CÆSAR MATTEI,

of Bologna, who had been in his early years a diligent student of botany and chemistry, and in later years a keen observer of nature, announced to the world his discovery of certain remedies that could powerfully counteract and expel diseases of the blood; and, in the case of cancer, if only administered in its early stage, drive it from the system altogether. Before bringing these under public notice, he had for years experimentally proved their intrinsic value, so that he could point to unnumbered and unquestioned results; and yet he has been almost more bitterly denounced and covered with opprobrium by the faculty at home and abroad than any other medical reformer in the past. His great sins in the sight of the medical world were two (for he is now no more): first, that he was a *layman*—as if no discovery of any importance had ever been or could ever be made by a *layman*; and second, that his remedies were *secret* and their *composition* unknown—as if the use of such were foreign to the regular profession! I had hoped that the composition, at least, of his remedies, if not the mode of their preparation, would have transpired after his death, but as yet his executor and heir

* Ruddock, on "Cancer."

shows no sign. I confess it is difficult for me, with my instincts and predilections, to defend this secrecy; though there are several grounds on which their use, despite this secrecy, might very plausibly be defended.

1. The regular faculty daily employ twice and thrice the number of medicines prepared from *secret formulæ* as those in the Count's list, and are guiltless—or rather winked at.

2. Where the composition of secret remedies has been revealed in the past, at the instigation of the profession (as in the case of Dr. Warburg's celebrated "Fever Tincture" in the south, and Dr. Bow's "Liniment" in the north), forthwith spurious imitations have been prepared whereby these once famous remedies have been deposed from their old niche in the temple of fame. (I might mention here, that after Dr. Warburg revealed the composition of his famous tincture, every chemist in the kingdom prepared it *forthwith* for his own business, and the sale of Warburg's *own* was virtually ended; so that from having lived in affluence, he was suddenly plunged into penury, and but two months before his lamented death an appeal was made on his behalf in the leading medical journals for subscriptions from the profession and those who had benefited by his preparation; on seeing which, in all probability, his heart broke within him, for he died very shortly after the appeal appeared, and suddenly also, in the wretched condition in which he had pined so long.)

3. In Count Mattei's own lifetime several clever imitators had arisen, and placed spurious imitations on the market, adopting virtually the same nomenclature.

4. Further, he keenly felt that the value of his discovery and the welfare of his patients depended on their using his remedies, prepared always according to the same formula, and as long as possible by the same hands (as all makers and vendors of tabloids and specifics affirm still).

5. Then he never sought to enrich *himself* by the sale of his remedies, nor to secure his own personal aggrandisement

or enjoyment, for he lived the plainest of lives, and scattered his remedies broadcast among the poor at home and abroad, and when he died left the bulk of his accumulations to works of religious charity.

When all these things are taken into consideration, one feels that the late Count and his heir are no more to be blamed for the retention of their secret than any other of the distinguished men who have diverged from the regular ranks and preceded them on the same path. While I deeply deplore and deprecate this secrecy, I cannot refrain from acknowledging how deeply indebted I have been to these remedies for the most remarkable results I have ever obtained in the treatment of the most formidable of diseases. As this little book may fall into the hands of some who have never read "The Cancer Controversy," I will for their sakes recount a few of the achievements of these remedies at home and abroad during these fifteen years, for, as their venerable discoverer said long ago, "what the sensible, suffering world wants is not *words* but *facts*."

I may premise that while the names of patients whose cases have already been fully published shall be restated here, I am prepared to substantiate any statement I may make in describing other cases in which the names are withheld.

I shall begin with the case of Mrs. Ferguson, first recorded in *The Review of Reviews* and "The Cancer Controversy," as being, according to Dr. Snow, if true, "unparalleled in the whole history of the world."

Mrs. Ferguson's Case,

as recounted by Mr. Stead in *The Review of Reviews.*

"Mrs. Ferguson, a widow of thirty-eight years of age, living on the Clyde, suffered from cancer in the breast, which was operated upon at Edinburgh Infirmary by Professor A—— on October 8th, 1886. After returning home as convalescent, cancer

broke out again, and she was subjected to a second operation on November 30th, 1887. The wound was a long time healing, but the cancer again appeared, and this time she underwent a deeper operation, on January 21st, 1889. When the cancer reappeared, it was thought useless to subject the patient for the fourth time to the knife, and she was left to die. The disease was so far advanced that when she was brought under the attention of Dr. Kennedy, in September, 1889, he expressed an opinion that the case was hopeless, and that she had not more than two or three months to live. He would, however, prescribe medicines to alleviate her pain during the short time she had to live. Mrs. Ferguson, instead of dying, used the Mattei medicines and recovered. Dr. C——, who examined her before and sent her up to Edinburgh Infirmary, has certified that she has completely recovered, and is now in good health. The woman has been produced before Professor A—— and other members of the staff at Edinburgh. She was produced at Limmer's Hotel, and answered all questions that were put to her, and showed no trace of the disease beyond the scars of the previous operations."

If it be asked, is all this true? I reply, that never have the facts of any case on record been more fully canvassed and more incontrovertibly established. Writing with reference to it in *The National Review* for August, 1890, Dr. Snow, of the Brompton Hospital, characterised it as "the most flagrant exception to the accumulated experience of the 250,000 years" in which he presumed that man has inhabited this planet. He also demanded all names and addresses of the surgeon who first pronounced it cancer, of the surgeon who operated on three successive occasions, of the surgeon who, eighteen months after she left the Edinburgh Infirmary for the third time, certified her to be free from cancer, and fit to enter the Salvation Army as a lieutenant. Nay! not even would this suffice; he must see the woman herself with his own eyes! Accordingly, I went down to Scotland, went

to the Infirmary and obtained the following record from the register of operations :—

Extract from the Register of Operations conducted by Professor A—— in the Edinburgh Infirmary.

Mrs. E. F. ...	Oct. 8th, 1886 ...	Excision of Right Mamma.
	Nov. 30th, 1887 ...	Recurrent Scirrhus.
	Jan. 21st, 1889 ...	,, ,,

I brought the patient up from Dumbarton the following day, and set her before the learned professor who had operated the three several times (and who the day previous assured me that "she must have died long ago!") I also saw the surgeon in Glasgow who had certified, and obtained the very certificate itself, which had been forwarded to the General of the Salvation Army, on her application for admission as a lieutenant, as follows:—

Certificate from Surgeon as to her Health.

October 22nd.—I hereby certify that in July last I saw and examined Mrs. E. F. She informed me that she had been operated on for cancer of the breast and for recurrence. On examination I found a perfect healthy cicatrix, and the glands of the axilla normal. I certified her as in good and sound health.—G. R. A——, B.A., M.D.

Then, finally, I brought her up to London, and intimated to Dr. Snow that I was ready to set her before him, and asked him to suggest a place of meeting convenient for him, and to bring six medical friends with him, and I would bring other six. He replied, proposing that I should "first set her before one of the medical societies, as being the most suitable tribunal." This was his first move to the rear! Being at the time a Fellow of the British Gynæcological Society, I proposed to bring her case under their notice, and was requested to prepare a paper to be read on the occasion (as was customary), describing the history of the case and its treatment. I at once did this, and sent it to the sub-committee which, revises such papers and sanctions their being read.

After a short time I received a letter from the secretary, returning my manuscript, and adding that "the committee could not recommend the society to enter upon the case, as the means employed in the treatment were *extra-pharmacopœial.*" This door being summarily closed against "the most flagrant exception to the accumulated experience of the 250,000 years the world has lasted," I wrote to Dr. Snow again, and requested him to move *his* society to investigate the case, which, of course, he did not. I then appealed to him as at the first to bring six medical friends with him, and hold—as he had challenged it—an independent investigation, urging that, at his expressed desire, I had gone to Scotland at considerable inconvenience and expense, had procured the necessary evidence, had brought the patient up to town; and finally, when Dr. Snow declined this invitation and was evidently determined to evade all inquiry, I summoned a meeting myself on the Friday for the following Sunday afternoon at Limmer's Hotel, and issued some two hundred and fifty invitations to physicians and surgeons within a short radius.

That Sunday was a memorable Sunday! A heavy, frosty fog stretched itself over the West End, and the cold was intense; yet it had leaked out the day before that the late Sir Morell Mackenzie, who had just returned from Berlin, and had brought some of Koch's divine essence with him (then *a secret remedy*), would, that morning at nine o'clock, at the Golden Square Hospital, inject a portion of this into the body of a poor scrofulous boy; and the tidings spread like wildfire through the ranks of the profession, and long before the time appointed the board-room was crammed to its utmost extent with a throng of scientific men, eager to gaze on that small phial in the centre of the table, and not a few were left out in the cold, as there was no possibility of further access. The operation was soon over, and the lad dismissed to his bed. For days after doctors were dropping in by twos and threes to see what the effect had been, and nothing but disappointment greeted them,

At three p.m. of the same day—the most convenient hour of the day, and the sun was now shining brightly—"the most flagrant exception to the accumulated experience of 250,000 years" was on view, but no crowd assembled, though another case of cure, equally extraordinary, was also to be presented. Some twenty physicians and surgeons, the majority of whom were homœopaths, constituted the assemblage, but Dr. Snow, who should have been the first and the most prominent, was conspicuous by his absence! He had received a final notice on the Friday afternoon, and on the Saturday morning I had a note from Mrs. Snow stating that "her husband was ill, and in obedience to his doctor's orders had gone to the country"! Thus he who had virtually challenged the fray fled from the encounter.

Mrs. Ferguson, however, was carefully examined by those who came, as was also Mrs. Kilner, whose case will follow this, and the remarkable success of the Mattei treatment in both cases was fully acknowledged; but beyond this nothing more could be said or done. What a commentary this furnishes on Sir James Paget's weighty words in his Morton Lecture: "We are bound to search *everywhere*, and *in all ways*, to find a *method* or a *medicine* for either the *prevention* or the *cure* of cancer and cancerous diseases. It must be both *clinical* and *experimental*, and probably the latter will be more fruitful."

About this time a lady near London, suffering from cancer of the breast, requiring a nurse, wrote to me, and I sent Mrs. Ferguson to her to wait upon her for a short time, before returning home, until I could find a permanent one. She entered heartily upon this work with a devotion born of gratitude for her own wonderful recovery; and when, some time after, I discovered that she was physically unable to continue night and day the lifting and waiting upon a patient who was very heavy, I tried to withdraw her from the case, but she pertinaciously clung to her attached patient, till she passed away; and when I brought her to my own home to

rest awhile, I found that the delicate skin which had replaced that destroyed by the previous ulceration (extending from the right clavicle to the waist and well across to the left side of the body) was torn in two or three places. I placed her at once under fresh treatment, and in a few weeks the places healed up again, her strength was restored, and then she returned to her home in Dumbarton, and resumed her old position as her father's housekeeper. Some months later her health again gave way, when she entered a private hospital near her home, where she enjoyed many comforts, and her health considerably improved. I had the pleasure of visiting her there on returning from a holiday amid the Western Islands, and of finding her chest once more perfectly healed. The breach in the skin had at no time assumed the characteristics of malignancy! Soon after she was considered strong enough to return home and resume her household duties, and all preparations were made for her leaving the hospital on the following morning, when in the middle of the night she was seized with a sudden failure of heart, and, despite all that could be done by the physician who had been summoned to her side, she passed peacefully to the home of her Heavenly Father, Whom she had loved and served for many years.

Mrs. J. T. Kilner's Case.

The second "ancient" case is that of Mrs. J. T. Kilner, Edgerton, Huddersfield.

A small growth of a peculiar type, some time previously, showed itself behind the nail of the thimble finger of the right hand, evidently due to the pressure of the thimble. Her local physician treated it for a while with various lotions, but still it persisted. At length, he advised her to go up to London and consult Mr. Bryant (now Sir Thomas Bryant, Surgeon Extraordinary to the Queen). He at once pronounced it a "sarcoma," which is a peculiarly malignant affection. He removed the nail and scraped the bone, and she returned to her home in good

spirits. It soon healed, but alas! in some six weeks it recurred. She returned again, and this time the joint was removed! It returned a third time, the inflammation extending throughout the entire hand, and this time the finger was removed! Again the patient returned home, hoping that deliverance had now come. But in vain; in a few weeks more a recurrence was unmistakable, and progressed with great rapidity. All the tissues of her arm and hand swelled up and became discoloured. The lymphatic glands at the bend of the elbow enlarged, and the whole arm felt hot and heavy. With a sad heart she returned again to London, and waited upon the surgeon who had operated hitherto, and he now proposed to remove her arm without delay. She rebelled against this, and he assured her it was the only chance of saving her life. She could not see how this could be, but, judging from the regularity of the preceding recurrences, concluded that the next recurrence must be a fatal one, and refused her consent. He advised her and her husband to go at once and take the opinion of Sir James Paget in the matter. On doing so, Sir James confirmed the advice already given, and urged that the operation should be performed without delay, otherwise the immediate consequences would be most serious. Unwilling to face a fourth operation, and having had her attention called a day or two before to Lady Paget's article in *The National Review* on Count Mattei and his wonderful remedies, she came straight to me, and asked me if I thought these remedies could save her? I said I could make no promise as to their result, but I felt persuaded that if they could not, I did not think any further and more extensive operation could more than postpone the fatal issue for a very short time. She consulted her friends: one of them, a physician, and now a distinguished pathologist, strongly opposed her venturing upon the fresh, and to them, unknown treatment. She and her husband, however, settled the matter by placing her under my charge the following day. And the result was well-nigh miraculous! In two or three days the

discolouration in her arm (extending its deep, dark shade close to the shoulder) gradually disappeared. In a week the inflammation subsided, the hard and thickened tissues became soft, and in six weeks she returned to her home completely cured, and remains perfectly free of all trace of the disease to this day. I may add, that some months after her return she accidentally struck her breast against a projecting surface, with the common result of setting up a lump there, which gave her great anxiety, and which the ordinary practitioner would insist on removing at once with the knife. She came up again to town, but this time came straight to me. The lump was now about the size of a small egg, and giving considerable pain. She remained for four or five weeks under treatment, and again returned home free from anxiety. Years have passed, and she is to-day in perfect, even vigorous health. I saw her a few months ago, and with the exception of the lost finger she has no trace of the trouble. I have just had a letter from her. All these facts have been confirmed many a time since then by her own testimony, gladly borne. I may add, for the benefit of any medical reader, that the original growth was subjected to microscopic examination, and pronounced to be a "*round-celled sarcoma.*"

The Third Case

is that of a gardener residing in Edinburgh, now seventy-three years of age, whose remarkable recovery by the use of Count Mattei's remedies was reported to Mr. Stead, at the time when these remedies were being denounced as impudent frauds, in the following letter:—

"*August 20th*, 1892.

"W. T. STEAD, ESQ.,
"Editor, *Review of Reviews*, London.

"DEAR SIR,—

"Knowing the great interest you have always taken in propagating the benefit of the above remedies, I cannot allow

the statements which have just appeared in the columns of *The British Medical Journal* regarding them in the treatment of cancer to go unchallenged. With reference to the five cases mentioned therein I know nothing; but I am about to submit a case which, if read by any unprejudiced person, will give a different light as to their life-saving qualities. Of course, I could not expect any other sentiments to emanate from the minds of men who are sworn enemies to everything *which can cure*, if it be outside their orthodox mode of treatment. The case to which I refer is that of an old friend of mine, a man of sixty-six years of age, who was suffering from cancer in the throat. The particulars are as follows: About the end of 1890 he was seized with a severe pain, accompanied by swelling, at the back part of the throat, which latterly spread to the tongue and gums, so much so that it was with great difficulty he could swallow anything, on account of the swollen condition of these parts. He attended the Edinburgh Royal Infirmary for fully two months as an outdoor patient under the care of Dr. Mc——, the throat specialist there, who from time to time painted the affected parts. No progress being made, Dr. Mc—— recommended him to go and see Dr. J—— D——, the senior surgeon of the infirmary, who, after examination, suggested that he should become an in-patient. He consented, and after having had the case under his observation for five days, he declared the case one of epithelioma, and said an operation was inevitable. The operation was performed, and after three weeks my friend was dismissed as improved. For a short period subsequently he obtained relief, but a few months afterwards the old symptoms returned, with such increased severity that life became to him a perfect burden. He could neither eat nor sleep, became a shadow of his former self, and the incessant, excruciating pain nearly drove him mad. Towards the latter end of last year he again consulted Dr. D——, who, after a careful examination, said he would require to undergo another operation. He again became an in-patient;

but after being in for four days Dr. D—— informed him that the disease had gone too far, and that another operation, apart from risk, would be fruitless. He then left the infirmary, according to the opinion of one of the highest surgical authorities, *incurable*. . . . After my friend was dismissed from the infirmary the second time, his family were informed that he could not live for more than a month or two, and that they need not wish his life prolonged, as it would be one of intense suffering and pain. . . .

"But, thank God! through another friend he learnt of Count Mattei's remedies for the cure of cancer, and consulted Dr. Kennedy, of London. He began to apply them regularly, and continued to use them under his supervision till last month, when Dr. K. was able to assure him that he was *completely cured*. He is now able to go about his business as usual, and to use his own words, 'He never felt in better health than at present.' He has been examined to-day by Dr. Kennedy, who pronounces his case as one where the remedies have worked a *wonderful cure*, considering that Count Mattei has never held out any hope of cure in an aggravated case like this, and which had also been subjected to operation. . . . In Dr. Potter's letter to you, published in *The Review of Reviews* for January, 1891, writing on this subject, he says: 'If Count Mattei can cure where the orthodox practitioners cannot, he will be victorious, and deservedly so.' In the face of this case I shall expect that Dr. Potter, who believes in 'the survival of the fittest,' will cast in his lot at once with the disciples of Mattei.

"Believe me,

"Yours faithfully,

"J—— A——."

A year later, before starting on a tour round the world, I set this patient in perfect health before the distinguished surgeon who had operated on him. Having carefully examined

his throat, he said to me—and it was his only comment—"I think there was some difference of opinion as to the *diagnosis* of this case." I suggested that that could be easily cleared up by referring to the infirmary records, and setting the patient before the College of Surgeons. The patient is still alive and in perfect health, so far as his throat is concerned, at the present time. I saw him but a little while ago, and with the exception of a slight attack of influenza he was well. Asking him how his throat was, he replied, "I have never looked behind 'sin syne'"—*i.e.* since that time.

Case of Miss B—— (Aged 58).

The following is the lady's own description :—

"*November 1st*, 1899.

"Ten years ago I suddenly discovered a small lump in the right breast, quite painless, which soon began bleeding from the nipple. I spoke to my doctor about it, who made light of it, yet thought it was advisable to consult a surgeon. He took me to an eminent surgeon in London, who pronounced it to be cancer, and urged an immediate operation. The breast was removed in January, 1889. I recovered in due course, and was told that all the mischief had been removed, and that I need have no fear of any return, all of which I confidently believed. In a few months, however, it returned, and I underwent a second operation in the autumn of the same year. After that, I did not quite so readily believe the sanguine statements that were again made. In eighteen months another return, and another operation; and in June, 1894, yet another, making four operations. In June, 1895, it again made its appearance, but accompanied with much more pain and swellings in the neck, which were extremely painful. The doctor I consulted spoke very gravely. He took me to the surgeon, who also spoke very gravely, refusing to attempt another operation, and said he could do nothing for me, but he was quite sure my doctor

would do all in his power to allay the pain. In fact, I was given up, and nothing could be done beyond the help of narcotics. My relations were told it was but a few months I had to live. In my despair I suddenly remembered that Dr. Kennedy had cured a friend of mine of cancer with the Mattei remedies, and I at once resolved to go to him and see if he could help me. I went the following day. He told me candidly he could not promise to cure me after so many operations, but he thought he could relieve me of my pain and prolong my life for some years. In a few weeks after I began taking the medicine and using the applications the pain was so much less that I could sleep comfortably for hours, and in three months I was almost without pain and could forget the suffering. I still continue the treatment. It is now nearly four and a half years since I began, and I thank God daily that I was led to try this valuable treatment."

A Similar Spontaneous Testimony.

MRS. W—— (AGED 56), STOKE NEWINGTON, N.

"*August 24th*, 1892.

"TO DR. KENNEDY.

"DEAR SIR,—I have this day sent the following letter to to the Editor of *The Review of Reviews.*

"Yours, etc.

"TO MR. STEAD.

"DEAR SIR,—Having seen the report in your valuable *Review* of the alleged failure of Count Mattei's treatment of cancer, and I having received a great benefit from the same, I I feel it my duty to say so.

"I will state my case as briefly as I can. November, 1887, I asked my own doctor's opinion about a hard lump in my right breast. His opinion was it was cancer, but to confirm it I was advised to go to Sir James Paget. I did so, and *he said it was cancer*, and advised operation. Within seven days after a

successful operation was made by my own doctor at my home. The right breast was removed 17th day of November, 1887.

"In February, 1890, I had to consult my doctor again about a lump in the left breast, and *he said it was cancer.* I was too weak to have another operation, and he tried to disperse it. After two months' treatment it was no better, but grew worse. He said he had done his best.

"At that time I was shown a report in *The Review of Reviews (thanking you for that report)* of Count Mattei's treatment of cancer. I at once placed myself under Dr. Kennedy to be treated by him. The lump then was as large and as hard as an egg, and very painful. After about five months' treatment I was better, the lump disappeared, and the breast was the same as before, and I have enjoyed good health since.

"I am, dear sir, yours truly,

"A thankful patient, and a constant reader,

"M—— W——.

"P.S.—You are at liberty to make what use you like of this letter. Address to be given if necessary privately."

I wrote very recently to this lady inquiring how she now is, and have had the following reply:—

"*September 12th*, 1899.

"DEAR SIR,—

"Many thanks for your kind inquiries. I am pleased and thankful to say that I am in the full enjoyment of good health up to the present time, and have had no return of my past trouble. I shall be pleased at any time to recommend any poor sufferer to your treatment.

"Again thanking you for past kindness,

"I remain,

"Your ever grateful patient,

"M—— W——."

Mr. Charters' Case.

This case has attracted great attention in New Zealand and the Australian colonies. Mr. Robert Charters, of Mosgiel, Otago (whose age now must be at least sixty-five years), is an old settler, a well-known breeder of prize horses and cattle, and frequently appointed principal judge at agricultural cattle-shows. On one occasion he received a spent kick in the abdomen from a playful colt, which sickened him at the time and gave him anxiety for some little time afterwards. Later on he took part one day in a tug-of-war between bachelors and married men, and at the moment of greatest tension he felt something giving way within him immediately beneath the diaphragm. A tumour soon made its appearance, and became more and more pronounced, till by the advice of his local doctor he consulted the professor of surgery in Dunedin, who advised an operation, as on examination it revealed all the usual symptoms of malignant disease.

The patient went into a private hospital, two other surgeons of good repute were associated with the learned professor, the patient was placed under chloroform, and the operation proceeded. The tumour was fully exposed, and a portion of it was examined with the microscope. It was found to be *malignant*, and in proceeding to remove it, it soon appeared that the structures surrounding it were so invaded by and entwined with it that its removal would be very difficult. To facilitate this, however, the operator divided the tumour, and passed his hand through and beneath it to see if he could safely detach it, when it became apparent that if it were removed the patient would probably expire on the table, so that they would be unable to publish that afternoon that "the operation had been successful." The incision (as can be seen from a photograph in my possession) was quite four and a half to five inches long, not by any means an "exploratory incision" (as some twelve months later the professor stated it to be when he read a paper

on the subject before the Otago Branch of the Medical Association, entitled "The History of a Mistake"), which would be little more than inch, sufficient to admit a finger. He abandoned the operation, stitched up the aperture, and put the patient to bed, while his wife and family, who were anxiously awaiting the result, were informed that he had been unable to remove the tumour, and that the patient could not possibly survive more than three or four weeks.

At this juncture the attention of his wife and family was called to the remedies of Count Mattei by a neighbouring lady, who had derived and still derives, at the end of several years, great benefit from their use, in a case of malignant disease of the breast, and the family resolved that immediately on his return home, should he be spared to do so, these medicines, then procurable in Dunedin, should be administered to him. He was so far restored as to be able to be removed in two or three weeks; but on the first occasion of standing on his feet he felt unable to stand erect without experiencing a sharp pain at the seat of the operation, as though a stitch had included some portion of an internal structure and not been removed.

On reaching home he began at once to use the remedies and employ the external applications, and persevered steadily therewith for several months, improving daily in health and vigour as the weeks passed by, the family meantime having had direct communication with Count Mattei himself. The result, though slow in its progress, was surprising, and in the end highly satisfactory. The tumour softened, and at length distinct fluctuation made its appearance in the right side, some inches distant from the line of incision; an opening was made by his local surgeon, when a large quantity of laudable pus flowed forth, and continued to flow through the drainage-tube that was inserted, till abating, in fact ceasing altogether, the drainage-tube was removed, and the wound closed up completely. Months previously the operation

wound had quite healed, with the exception of a minute portion surrounding the lowest stitch. This still required and received daily dressing before the patient rose because of its persistent weeping, and the patient always complained of a pricking sensation at that spot on rising to his feet. Indeed, he could never raise himself to his full height from the moment he left the operation-table. One morning, while his wife was applying a fresh pledget of lint, the patient felt a sharp point of something or other like a pin projecting from the spot. His wife, seizing it between her finger and thumb, to their mutual amazement extracted a piece of bone, of irregular form, about one and a half inches long and a quarter of an inch broad, tapering to a point, and immediately the patient stood erect for the first time since he was laid on the operation-table.

The family carefully examined this foreign body, and the next day showed it to their doctor when he called. He seemed surprised, and asked their consent to take it with him that he might show it to the surgeon who had operated. He retained it, and it is neeedless to say that the family, however much they desired it, saw it no more! The doctor and his assistants in the operation, who must also have seen and discussed it, now publicly proclaimed that they had discovered the cause of Mr. Charters' serious illness, that they had made a mistake in *diagnosis*, that there had been no cancer at all, that the tumour was caused by the patient having swallowed a "*fish-bone*"—for this was the first announcement they made, and it speedily spread throughout the town of Dunedin as the latest piece of important local news!

This was of short duration, however, as one of the brotherhood of longer experience, seeing the absurdity of the thing, knowing that a fish-bone would have been speedily dissolved by the gastric juice, advised the withdrawal of this explanation and the employing another—"that it was something *like* a *chicken-bone*"; and the surgeon who operated, at the next meeting of the Medical Association, read a paper, furnishing

this explanation to his *confrères*, and flouting the supposition that Count Mattei's remedies had had any influence in bringing about this result. The report of that meeting would be interesting reading to medical men!

The Editor of *The Chemist and Druggist* of Australia (published, I think, in Sydney), referring to this belated discovery, argues that "if the bone that was discovered had been regarded of no importance, and had been thrown away, and its presence not mentioned, the inference would have been almost irresistible, that, until some other explanation was available, the Mattei remedies must be credited with the cure of a case which qualified men had declared to be malignant, but [it proceeded] as its presence was divulged, it is obvious [most logical and irresistible conclusion!] that it entirely destroys the evidential value of the case so far as these remedies are concerned." The facts are simply these, and they effectually destroy this theory and allegation founded upon it:—

1. The doctors, fresh from the operation, and for days after, replying to countless inquiries from intelligent citizens, (friends of the patient) as to how they found matters, and what were his chances of recovery, assured them right and left "that it was a very malignant tumour [as evinced by 'microscopical' examination], and so situated that removal was impossible without entailing his death, and that at the most he could not survive for more than three or four weeks."

2. Well nigh seven months elapsed before the tumour softened, pointed, was opened, emptied itself, and finally healed up, with the exception of the last half-inch, where this bone was found projecting, and on the removal of which the remaining opening closed almost immediately, indeed within twenty-four hours.

3. The patient, from the first hour he attempted to stand upon his feet in the hospital till this bone was extracted, could never assume an erect position, but had to bend his body so as to relieve the tension at the tender spot, and the day

following its removal he was entirely free from pain, and could stand upright.

4. The family, who had many years familiarity with fowls, both old and young, positively assert that it was in no respect "like a chicken-bone," as the professor asserted; and it would take an unusually clever man—yea! a dozen professors—to explain intelligently (*a*) how a "chicken-bone" of considerable size (an inch and a half long, by a quarter of an inch wide, tapering to a sharp point) could be swallowed by a man of sixty years without doing him most serious injury at once, and exciting the deepest anxiety of his family, in whose presence he must have swallowed it, and the family history records no such commotion; (*b*) how, supposing it had reached his stomach imbedded in a bolus of food, it could, either as a fish-bone or a chicken-bone, pass thence from the stomach into structures at least four inches beneath without destroying the patient. The performances of Indian jugglers swallowing a sword are nothing to this! (*c*) The local doctor obtained it from the family to show it to the surgeons, and it is needless to add that it has never yet been returned.

Shortly after this "History of a Mistake" saw the light I arrived at Dunedin, whither I went very much to investigate this very case. The report that had been published in this country awakened in my mind strong doubts as to the possibility or probability of cure in the circumstances described, and on all sides it was pronounced to be a senseless fabrication. Those who read *Modern Medicine* will remember (and may refer to it) that it was alleged that Mr. Charters' *stomach* had been opened, and this excited my curiosity to see and be satisfied on this score. Now if the single word "abdomen" had been employed instead of "stomach," that report was literally and substantially correct.

The friends of Mattei at Dunedin had arranged that I should, after my arrival, deliver a lecture on "Count Mattei and his Remedies," and that the chair should be taken by

"Mr. Robert Charters." I felt that in such circumstances reference would certainly be made by Mr. Charters, and expected from myself, to his extraordinary resurrection. I was reluctant to do so without the fullest information I could possibly obtain; and accordingly, acting upon the golden rule, I called upon the learned professor, and respectfully asked him for all the information he could give me on the subject, as I did not wish to make any unfair or inaccurate strictures on the case. I gladly embrace this opportunity of testifying to the gentlemanly urbanity with which he received me, and the complete frankness with which he detailed the case. He described the operation to me, and how, when they reached the tumour, they found it firmly attached to surrounding structures, and in a sense immovable; how next he divided it right through in order to ascertain its subjacent adhesions, and found it so intertwined with important structures that to remove it was impossible, because dangerous. He also read to me the paper which he had presented to the Medical Society; and on asking him further for a sight of the bone or the thing that resembled a *chicken-bone*, as it would gratify my curiosity, and also that I might see the microscopic section of the tumour, which would reveal its *malignancy*, or otherwise, he replied that "the former, at least, if not both of them, had been handed over to the pathologist at the University, and he had never seen them since."

I did not refer to Mr. Charters' case at the meeting, as I wished to reserve my comments on his case till I could procure a copy of the medical journal in which the transactions of the Society were recorded, when I wrote a review of those transactions in an article entitled "The History of a Mistake [as the article in the journal was headed] Revised and Corrected." I shall not reproduce this here, as it is in the possession or at the service of every dweller in New Zealand; but I may mention that I ventured to suggest, and still adhere to the opinion, that when dividing the tumour with an ivory-handled

scalpel (which is a flat piece of ivory five or six inches long, with a sharp knife immovably fixed at the cutting end) this had at one time fallen from the table and been trodden upon and cracked (this crack probably slight and perfectly safe, so long as held by the hand), and when the incision was made through the tumour, the surgeon, without thinking of the condition of the handle, turned the scalpel in his hand to separate the sides of the tumour so that his fingers, and eventually his hand, might pass through to examine the structures beneath, the pressure needed being considerable, the splinter from the handle was detached, left behind, and eventually sewed up, when the unsuccessful operation was ended. Evidently it was not in the abdomen prior to the operation, and could not have been in the position which it finally reached (about three-quarters of an inch from the lower end of the incision, and laying straight across it) when that incision was first made, otherwise the knife must have been arrested by it; so that the inference is irresistible that in this extraordinary case, which three highly qualified men declared to be malignant, and abandoned, as they believed, to certain and early death, Mr. Charters was restored to perfect health (which, I believe, he still enjoys) by means of the much abused homœopathic remedies of Count Mattei.

A Similar Case.

While this discussion was proceeding in Dunedin, I was invited by a gentleman to visit his wife, who had in some respects passed through a similar experience to Mr. Charters, save that no operation had ever taken place. Both he and his wife were anxious to know if I considered her perfectly cured, and unlikely to be similarly afflicted again. I learned that a year or more previously, when nursing an aged relative who was heavy and helpless, and raising her up in bed, she was conscious of something suddenly giving way within her.

She felt sick, and had to lie down for some time, and gradually became conscious of a steadily increasing swelling beneath the stomach. The family doctor advised and urged operation, but she persistently refused; and having heard at this time of the fame of Count Mattei's remedies, she communicated direct with him, and pursued the treatment prescribed, with the result that in seven or eight months the same changes precisely took place as in Mr. Charters' case—the tumour softened, pointed at the same spot in the right side, burst, freely discharged, then dried up day by day, and healed completely! And in this case there was neither fish-bone nor chicken-bone to account for it, and this lady is, I believe, alive and well to-day.

Another Striking Case of Life Greatly Prolonged and Sufferings Mitigated.

MR. R. S—— (AGED 62).

October 20th, 1892.—Patient reported that four years previously he had, by the direction of Mr. Jonathan Hutchinson, undergone an operation for a cancerous condition of the tongue. He had been a heavy smoker, and this, no doubt, induced the disease. Some time prior to his visiting me the disease had recurred, and his own physician and Mr. Jonathan Hutchinson advised another operation. The patient refused his consent; and having heard of Count Mattei's remedies, and desiring to try them, was placed under treatment, although I assured him that nothing more than palliation of his sufferings could possibly be secured. He persisted in the use of the remedies steadily till May, 1893, and then ceased to attend, as he felt so much better that he fancied he could continue treatment without paying stated visits to me. Thus two years and four months passed away.

On September 19th, 1895, when I imagined that the patient must have joined the majority, I was surprised to find him and his friend, who had accompanied him at first, ushered into my

presence for fresh advice. He had had a fresh outbreak of the disease. His tongue was now something sad to witness—several rugged ridges and fissures, with a constant flow of mucus and saliva tinged frequently with blood. Both the patient and his friend took a very gloomy view of his condition—so did I. He was therefore by no means surprised at the very guarded prognosis which I gave. I found he had been pursuing his use of the remedies according to the best judgment of himself and his family—a practice not uncommon with patients whose case is protracted, and whereby they commonly lose ground which they can never regain.

On January 3rd, 1896, he returned with his London friend once more, having been in constant communication with me since September, and there was a marked improvement in the state of the tongue. The disease had again been arrested, and the general conditions greatly improved. Through this year and the following he was unable to leave home, and I visited him from time to time, and was surprised at witnessing the strong vital force which some men inherit, and likewise the extraordinary influence of the Mattei remedies in arresting hæmorrhage and subduing pain.

About the close of December, 1896, he passed peacefully to his rest, and was thus spared to a loving family fully four years beyond the time at which a second operation would most probably have sealed his doom.

These are but a specimen of the cases in which results, "unparalleled [as Dr. Snow will say] during the past 250,000 years which the world has lasted," have been obtained from the use of the Mattei remedies during the past fifteen years in my own experience; and surely if any of these patients are still alive (and the majority are), and if there be any value, any truth, in testimony, it can soon be ascertained what their condition *was* a few months or a few years back, and this can be compared with their condition now. If

results have been obtained differing in such a marked degree from the results obtained in this disease by ordinary methods of treatment (a matter easily verified by inquiry), should not the medical profession, instead of resisting and endeavouring to extinguish, welcome any fresh light that has dawned on this dark domain of disease, and, in the interests of suffering humanity, seek to avail themselves of it.

THE FIVE TEST CASES.

DOUBTLESS not a few of my readers will ask, what has become of the "Five Test Cases" which were submitted to the Mattei treatment, and supervised by a special committee of distinguished surgeons? To this investigation Mr. Stead had invited the opinion and approbation of a number of leading scientific men; and amongst others, Professor Huxley replied as follows:—

"I should need to have at least fifty cases of cancer (if possible more) placed at my disposal in a cancer hospital, where all would live under the same general conditions. The history of each patient should be carefully ascertained, and a reasonable diagnosis of the nature and entail of the disease, at the date of the commencement of the inquiry, should be drawn up and signed by a small committee of recognised experts in cancer, none of whom should be members of the hospital staff. Of these cases, one-half (chosen by lot) should be placed (of course with their consent) at the disposal of Count Mattei, who should have entire control of their treatment, while the other half should continue to be dealt with by the ordinary therapeutical means.

"The history of each patient should, thenceforward, be exactly recorded until death, when the diagnosis should be tested by post-mortem examination, or until such time as the committee of experts were willing to certify that the disease had disappeared. But even in this case, the patient should not be lost sight of for at least ten years."

This would have been a fair, sensible, scientific test, and such as I strenuously urged upon the committee when formed, the late Sir Morell Mackenzie occupying the chair. The various

members of the committee objected to this; and the chairman ingenously urged: "We admit that *all cases* treated by us will succumb to the disease; what we want to see is whether you can cure any one of them!" Seeing that desperate cases had been cured already, and that our confidence in the power of the remedies was unshaken, and that some *one* at least of the five cases would most probably be cured; and seeing, besides, that if we did not undertake them the investigation would proceed no further, and that we would be branded as cowards and imposters, we resolved to embrace the opportunity that never might present itself again, and do our best to demonstrate that what the remedies had done already they could do again. And so we entered upon the investigation with a sincere desire to show a more excellent way of dealing with this dreadful upas-tree.

At the very outset of this investigation the committee (consisting of Sir Morell Mackenzie, Sir Lawson Tait, Mr. Henry Reeves, Dr. Potter, Mr. John Hopkins, and Mr. W. T. Stead as secretary), spontaneously passed the following resolution on June 19th, 1891:—

"Nothing in future should be published concerning the proceedings of the committee, except under the authority of the committee, and any such report to be published by itself, and not mixed up with any other statements concerning the Mattei remedies."

Matters progressed smoothly for about a year. At first the patients were installed in a comfortable ward at St. Saviour's, which the late Mrs. Palmer, with her usual liberality, placed at the service of the committee, and everything that could minister to the comfort and welfare of the patients was provided and done for them. I soon discovered, however, that whilst it was very convenient to have these five women in a separate ward, they were longing to be with their families, and tired of looking at one another; and, being responsible for their treatment, and satisfied that they would progress more satis-

factorily in their own homes, I obtained the committee's consent to their returning home, on the condition that they came back to the hospital every week, and were seen by the surgeon appointed by the committee to supervise their treatment. In consequence of this arrangement the patients improved rapidly in general health, whilst their disease was so far arrested and modified that there seemed little likelihood of an early or fatal termination to any of them.

At this juncture, like a bolt from the blue, there appeared on May 4th, 1892, in the columns of the *Medical Press and Circular*, an editorial article, assailing the committee for lending themselves to such an investigation as "the farce of submitting patients, suffering from cancer, to the so-called Mattei treatment. Why representative men of the profession should have identified themselves with an undertaking of this nature seems inconceivable!" Later on in the article it became manifest that if not written, it was at least inspired by a member of the committee itself, as appears from the following: "These cases are being treated under the observation of the committee; but it was decided last June that until some definite result had been arrived at, no reports would be issued."

This insidious attack on the committee should have evoked a conjoint, brief, and dignified reply from them, explaining their position, and assuring the anxious, meddling editor that "the honour of the profession and the interests of the public were perfectly safe in their hands," instead of which three of the principal members severally replied! One of them, being most probably the author of the article, wrote: "It would be premature at present to make any definite report upon the cases; but so far as I am concerned, I may be permitted to say that I have seen nothing in Matteism as yet which differentiates it favourably from any other form of quackery." The second wrote: "I do not wish to prejudge the issue; I was one of the very first to disbelieve in the much-vaunted Koch cure for consumption, and was speedily dubbed prejudiced, unscientific,

etc., and you may be sure I can have no faith in these so-called cures." Whilst the third, whom I had never seen at any meeting of the committee, and who, I believe, had never seen one of the cases, wrote as follows: "I expressed my readiness to receive and adopt a cure for cancer, no matter from whatever source it could be derived, though—at the time—I expressed great doubt as to the likelihood of such a blessing coming from such a course. My doubts have been verified."

In consequence of this deliberate attempt to stifle the inquiry and prejudice the public mind, we first of all demanded an apology for the violation of a distinct compact; and when this was refused, we dissolved our connection with the committee, but not with the patients. The committee strongly urged on them the desirability of submitting to operation at once (as their only chance of prolonging their life) and of abandoning the Mattei treatment; but, severally, they *all* elected to continue the treatment which had already done so much for the relief of their previous sufferings.

A year after this, and again a year later, Mr. Stead, receiving repeated inquiries from all parts as to the progress of the patients, wrote to them, and obtained replies which were published in *The Review of Reviews* for September, 1892, and February, 1893, which reports I shall reproduce here, preceded by my early notes of the cases, and followed up by a brief account of their closing years.

First Test Case.

MRS. B—— (AGED 52).

History of Case.

"*June 1st*, 1891.—Mother died of cancer at forty-nine. Patient first observed a lump in right breast two months ago, in which she is supposed to have had a blow. She has just come out of the Stanley Hospital, Liverpool, where Mr. K—— S—— and two other surgeons wished to operate at once. Besides the

tumour in the breast the lymphatics leading to the axilla and a gland therein are enlarged.

"*October 22nd*, 1891.—She calls to see whether she is a suitable case for the investigation, having been approved of as such by Mr. Reeves and Dr. Potter. She suffers considerable pain in breast, armpit, and arm. Is a victim to indigestion, and is easily exhausted. Accepted as a test case.

"*June 30th*, 1892.—Since treatment she has entirely lost all her pain. Her digestion is greatly improved, and now she is strong and well. A fortnight ago she saw Mr. K—— S——, who expressed his gratification at the patient's appearance, said the doctors must be keeping her in good health, and advised perseverance with the treatment. When she began the treatment she was unable to lie on her right side, but can do so now without the slightest inconvenience."

Patient's Statement of Past and Present Condition.

"*August 19th*, 1892.

"Since beginning the Mattei treatment, now about twelve months ago, I have been ever so much better in every way. I eat better, sleep better, and feel stronger. Before I was always ailing something, such as indigestion, low spirits, rheumatism in hands, palpitation, shortness of breath, etc.; but now I feel quite strong. I can walk any distance without fatigue, and feel brighter altogether—in fact, am quite a new woman. At first I had much shooting and springing pains in the breast; now, under treatment, these have almost entirely disappeared. The lump at present in my armpit is very small compared with what it used to be.

"M—— B——."

Second Report.

"*January 25th*, 1893.

"The effect of the Mattei medicines upon my general health during the first year was indeed wonderful. I had been a

great sufferer from indigestion and lowness of spirits, and from rheumatism, which racked my frame and made me lie awake for hours night after night. These things gradually left me, and my general health and strength improved greatly. As the cancer grew, I had shooting pains, but never so that I lost a night's rest on account of them. During the past week I have had two attacks of pain in my breast, which is now more of a throbbing character, but on each occasion I have found an almost immediate relief by an application of the green electricity.

"I can honestly say that I have never lost one single night's rest these twenty-one months I have had the cancer because of pain connected with it. For two months past I have been suffering from a severe attack of influenza, which has deprived me of all power to carry on my ordinary household duties. Except for that I have all along carried on my work, making no difference other than avoiding the lifting of heavy weights with my right arm. I am able to sleep on my right side quite as easily as on the left, and do indeed mostly rest on the right side, in spite of the cancer.

"I should like to say how confident I feel that my cancer will be got rid of by these wonderful medicines of Count Mattei.

"I remember my poor mother's sufferings, and think, oh! if she could have had relief and ease as I have; and I shut my eyes and thank God that a means has been found by which thousands of cancer-stricken women may, as I know, find certain relief, and, as I believe, a genuine remedy.

"M—— B——."

Shortly after this patient was again attacked with influenza, which was complicated with bronchitis, and no sooner had she recovered from this under Mattei treatment, than she had a second attack, and a month later a third; which, combined with old standing weakness of the heart, terminated her existence (April 30th, 1894).

Second Test Case.

MRS. R—— (AGED 46).

History of Case.

"*June 25th*, 1891.—The patient first observed, over two years ago, a small lump in the right breast, where she had had previously a blow. Three weeks ago she consulted Sir J—— P——, who recommended immediate removal of the breast, wrote his opinion to the registrar, and predicted, should operation be performed, a recurrence of the disease under two years.

"*June 1st*, 1891.—She entered the hospital as a test case, and was put under treatment. The skin over the tumour, to which it was attached, was slightly discoloured.

"*June 30th*, 1892.—During the first two months of treatment she gained in weight and improved in general health; but the small tumour, though not increasing in size, was more discoloured. It ultimately broke down, and has continued to fungate and ulcerate till now. Notwithstanding this she is at present date in excellent health, and has recently been fit for considerable exertion.

Patient's Statement of Past and Present Condition.

"*August 19th*, 1892.

"I have been a great deal better since coming under the Mattei treatment. Recently—a month ago—I was able, when on a visit to Scotland, to walk several miles a day, which I could not have done before commencing the treatment. Within a week or two after beginning I was able to sleep much better, and experienced altogether a wonderful change in my general health. I formerly suffered much from bilious attacks and sick-headaches, but am now perfectly free from them. I have increased in weight since beginning the treatment, and the *application of green electricity invariably relieves the attacks of*

pain. This fact I communicated to the registrar of the committee, who has omitted to take any notice of it.

"M—— R——."

Second Report.

"*January* 21*st*, 1893.

"It is now nearly two years since I adopted the Mattei remedies, and I am still persevering with them. Shortly after I commenced the treatment my health improved very much, and has kept fairly well ever since. I had suffered very much from indigestion for several years, but that is quite cured, and I have also gained in weight.

"When I first saw Dr. Kennedy, senior, in July, 1891, he said I would be fortunate if I were cured in three years, half of which time has now elapsed; and the doctors assure me that my breast is doing very well indeed. I have suffered little pain, except when I have caught cold or been out in very wet or cold weather, which affects me at once; but I have always found, if I had sharp or stinging pain, that I got immediate relief by applying green electricity; or if the pain were burning and irritating, I found the blue relieve it. On many occasions I would have had little rest or sleep with pain had it not been for the applications of green electricity.

"I have been all through fairly active and able to superintend my household duties, and not been confined to bed at any time during this trouble; and I cannot sufficiently express my thankfulness and satisfaction for the benefits I have received from these remedies.

"M—— R——."

In the August following this patient after a slight attack of influenza, went to the seaside, and so thoroughly regained her strength that one day, before returning home, she walked seven miles without being the worse for it. In the beginning of 1894 her general health once more gave way, and she gradually declined, till on June 8th, 1894, she entered into rest.

Third Test Case.

MRS. L—— (AGED 58).

History of Case.

"*September*, 1891.—Has been under treatment from time to time for rheumatic gout for three years. She has experienced recently a sharp pain in the right breast, where a tumour is found to be present. We proposed to the registrar to admit her as a test case.

"*December*, 1891.—On the approval of Mr. Reeves, she is put under the treatment. There is no complication in the armpit, the nipple is not retracted, nor is there any discharge.

"*June* 30*th*, 1892.—The nipple is still perfectly free. The tumour, though not less in width, is narrower from top to bottom, and is becoming lobulated, as if breaking up. The general health has continued good, and, though not entirely free from rheumatic gout, she suffers much less than formerly."

Patient's Statement of Past and Present Condition.

"*August* 19*th*, 1892.

"I have been under the Mattei treatment for several years for gout (three years) and for six weeks before commencing was entirely laid up. From the time of taking the medicines I steadily improved, so that now I have but slight attacks of gout. The treatment for the tumour in breast I began about nine months ago, three months after the discovery of the tumour. The pain at first was most severe in the breast, but was soon relieved by the use of the remedies. My general health is excellent; my digestion, from which I suffered very much at one time, is now very much better. The hard substance in the breast is, I think, a little smaller than it used to be.

"A—— L——.

Second Report.

"*January 25th*, 1893.

"With regard to the tumour in my breast, I have suffered no pain since using the remedies, and I have no lump under my arm, and am quite able to attend to my household duties.

"A—— L——."

After this the patient continued in excellent health, and about the end of June, 1893, she asked permission to visit her brother at Lisbon, who was ill, and much wanted her to go to him and nurse him. The last entry prior to her departure was as follows:—

"*June 30th*, 1893.—Nipple now perfectly free, and tumour narrower and lobulated, as if breaking up into separate sections. Patient's general health continues good."

My next entry is:—

"*June 4th*, 1894.—Patient, returned from Lisbon, comes to report herself. I find her greatly damaged by her year's sojourn with and sick-nursing of her brother, who died a fortnight ago. The tumour is considerably enlarged and fungating, and an ulcerative process begun. Patient regretfully acknowledges that she had suspended the treatment."

From this time onward patient steadily declined in health; but all her sufferings were materially alleviated, so that during the following three years, in which she renewed her regular use of the remedies, she enjoyed wondrous brightness and vigour, occupying her own little home, and unattended in any form, till within the last three weeks of her life, which she spent, surrounded with every comfort and loving attention, in the "Home of Rest for the Dying." I visited her there several times, and the expressions of her gratitude to myself and to the representatives of Count Mattei, who had freely supplied all her remedies during the six years of her treatment, were unstinted and unfailing. She died on August 18th, 1897, having lived close upon six years.

Fourth Test Case.

Mrs. L—— (AGED 53).

History of Case.

"*June*, 1891.—Eight years ago had a blow in the breast from a board. Three years later observed a lump in right breast like a "swollen gland." She consulted Mr. C——, St. T—— Hospital, who did not advise removal, as it would certainly recur if operated on. He found the axillary glands affected. Subsequently she saw Mr. C—— and two other surgeons. All were agreed as to the nature of the tumour, and allotted two years as the space of life. The tumour now infiltrates a large portion of the breast; and the pain, of a burning character, is present in armpit and along the arm. The general health is poor, and digestion out of order. She also has a large swelling about the size of an egg in the posterior boundary of the armpit, which is very painful, and prevents her from lying on her back.

"*June 30th*, 1892.—The patient's health is greatly improved, and the digestion much better than previously. She has been free from pain for several months, and on a recent occasion drew the attention of the registrar to the immunity from pain which she and other patients enjoyed. The lump in the fold of the armpit has disappeared, and she has had no discomfort there for four months."

Patient's Statement of Past and Present Condition.

"*August 26th*, 1892.

"I am thankful to say that since I have been under the Mattei treatment my health has greatly improved. For the last six months I have been able to take my rest undisturbed at nights, whereas before I used to suffer pain especially when lying in bed. From this pain I am now quite free. Likewise the egg-shaped swelling under the arm has disappeared; and for

the last three months I have not had any pain from the cancer. The electricity has entirely removed the rheumatic pains from the shoulder. All this greatly encourages me to go on with the Mattei treatment, after being under allopathic treatment for some time previously without relief.

"C—— L——."

Second Report.

"*January 25th*, 1893.

"I beg to say that I am still under the Mattei treatment, and since I have been under the Drs. Kennedy I have greatly improved in my general health. Before being under their treatment I suffered from severe indigestion and poor health, and was continually under allopathic treatment without getting any relief.

"I am thankful to say that the pains from the cancer, which were bad some months since, were immediately allayed by the green electricity, and an egg-shaped swelling under the arm entirely disappeared after a few months' treatment. Also the pains in the shoulder and under the arm which disturbed my rest were removed by red electricity, and I feel no pains now, and have not for some months past.

"I sleep well, my appetite is good, and I am able to attend to my domestic duties better than I have for some years past.

"C—— L——."

This patient continued improving under treatment, and on October 28th, 1892, I was able to record that her general health was excellent, and she went on in the full discharge of her household duties till an unfortunate accident terminated her life. On July 4th, 1894, she had stewed a quantity of plums in a copper preserving-pan for the family use, and the residue were left in the pan for the following day, when, after partaking of these at their mid-day meal, first one and then another of the children were seized with vomiting, then the patient, and

finally her husband. The children's lives were saved, due, doubtless, to their early vomiting of the ingesta; but despite every effort to save the parents, first the father died, and some four hours later my patient also passed away, July 4th, 1894. She thus lived more than three years, and but for this unhappy event might have been living yet.

Fifth and Last Test Case.

MRS. M—— (AGED 66).

History of Case.

"*May 26th*, 1891.—Five years ago breast was bruised very much from a fall. Two months ago noticed a discharge of fluid from the nipple, following a period of pain and discomfort in the breast. Consulted Dr. D——, of B——, who said, 'This is decidedly cancer, and you must have it removed.' She further consulted Drs. O—— and R——, of Soho Hospital, whence she was referred to Sir M. Mackenzie as a suitable case for the test. Received this day as a suitable test case. The tumour is situated above the right nipple, which is slightly retracted, and from which there exudes a thin serous fluid. In the right armpit is an enlarged gland the size of a hazel nut. She complains of serious indigestion, sluggish liver, and its effects.

"*June 30th*, 1892.—Had a sharp attack of influenza in January, 1892, but recovered perfectly. The indigestion has disappeared. The pain in armpit and down the right arm has entirely ceased, and the enlargement of the gland has vanished. The nipple is more prominent, less retracted, and freer. The breast is softer, and exudation has ceased for three or four weeks."

Patient's Statement of Past and Present Condition.

"*August 19th*, 1892.

"My general health is much better just now than it was before I began the treatment. My digestion, from which I have

suffered very much for most of my life, is now quite well, my appetite is good, and I feel altogether in excellent health. The pain at one time was very severe in the arm, compelling me to nurse it with the other hand or carry it in a sling; but for the last six months I have lost the pain completely, and am now entirely free from any discomfort.

"M. A. M——."

Second Report.

"*January 26th*, 1893.

"Several medical men, about May, 1891, pronounced an operation as imperative. The complaint developed itself, and for some time I suffered from a swelling under my right arm with such severe pain that I had to carry my arm in a sling, and my general health was anything but good.

"It was not long, however, before the Mattei remedies began to have a beneficial effect upon my health, and with it an abatement of the symptoms, which can be judged when I inform you that for more than fifteen months past I have discarded the sling for my arm, and I am, and have been, able to attend to my domestic duties for the same period.

"I have found frequent and great relief by using externally the green electricity for pricking pains in the breast, and also in using No. 5 canceroso ointment.

"I feel certain that had it not been for the benefit I derived from using the remedies, *accurately*, *as directed*, I should long since have been unable to do what I can at present, and my progress has been such that it gives me good hope of an ultimate cure.

"M. A. M——."

The progress of this patient after this date was most satisfactory. She continued in excellent health, and although she had an attack of influenza in the spring of 1895 she got completely over it, and continued all her domestic duties, coming

to see me every four or five weeks until the week before the Jubilee, when I was greatly pleased with her brightness and vigour. She not only attended the Queen's Diamond Jubilee procession in June, 1897, but unfortunately went out in the evening to inspect the illuminations, and caught a severe cold, which developed into pneumonia. From this, however, she appeared to be recovering under the treatment of her local doctor, when suddenly she was seized with serious failure of the heart, and passed away on August 18th, 1897, to my deep regret and the regret of her family. The certificate of her death bore:—

Died.	Name.	Age.	Cause of Death.	When Registered.
Eighteenth August, 1897	M—— A—— M——	72 years	Pleurisy and pneumonia. Syncope. Certified by H. A. F——, M.R.C.S.Eng.	Nineteenth August, 1897

I certify that the above is a true copy of an Entry in the Register Book of Deaths in the Registrar's Sub-District of B——.

Witness my hand, this fifteenth day of October, 1898.

J. J. B——,

Deputy Superintendent Registrar of the said district of B——.

AVERAGE DURATION OF LIFE.

Name.	Began Treatment.	Died.
1. Mrs. M. B——	June 1, 1891	April 30, 1894
2. Mrs. R——	June 25, 1891	June 8, 1894
3. Mrs. L——	Sept., 1891	Aug. 19, 1897
4. Mrs. L——	June, 1891	July 4, 1894
5. Mrs. M. A. M——	May 26, 1891	August 18, 1897

These five patients therefore enjoyed an average life of four and a half years—three of them *three* years, and two of them *six*—free from much of the suffering through which other-

wise they must have passed. In *three* of the cases death was not strictly due to the primary cause for which they had been treated, so that Mrs. M. B—— might have lived another year but for the repeated attacks of influenza and bronchitis; Mrs. L—— (No. 4) another year or two but for the partaking of the poisoned plums; whilst Mrs. M. A. M—— was to all intents and purposes cured of the disease and might have been alive at this day but for the sad attack of pneumonia and subsequent failure of heart.

Writing a report in his *Review of Reviews* so far back as 1893, and subsequent to the death of one of these patients (Mrs. B——, April, 1894), Mr. Stead urged: "So far as the test cases go, they certainly appear to justify all that has been done to bring the remedies before the attention of the public. To those who may be disposed to deny that any good has been achieved, because the alleviation of agony has not also been accompanied by the cure of the disease, it is enough to say that they have evidently not known what it is to nurse any one dying of cancer. A remedy which would enable all cancer patients to die *painlessly* would be a greater boon to the world than a medicine which cured ten per cent. of the cases, and left the other ninety per cent. to suffer without any alleviation of their torment."

We can fearlessly affirm that this remedy has been found, and its discoverer—the late Count Mattei.

Before passing from these test cases, I may refer to the fact that in July, 1892, when we declined to have any further connection with men who could act so unprofessionally as to violate the condition of conducting the investigation which they themselves enacted, the committee issued the following report:—

"The committee of investigation of the so-called Mattei cure for cancer having consented to watch the progress of five cases of cancer, under the treatment of two legally qualified medical representatives of Count Mattei, have now completed their work. The five cases have been under close observation

during the space of one year. The Mattei representatives have withdrawn from the test they themselves challenged, but not before sufficient evidence has been obtained to convince the committee of the altogether inert character of the so-called cure. The following brief report sets forth the main facts :

"The cancerous disease has steadily advanced in all the five cases. In one chronic case the advance has been slow, but perceptible; in three cases, moderately rapid; while in a fifth the progress of the disease has been very rapid. As in other similar cases, the subjective symptoms do not tally with the objective signs—that is to say, the patients, in all of whom the disease is in an early [?] stage, and who are buoyed up by the hope always inspired by a new form of treatment, give a favourable account of their feelings, and believe they have derived benefit. The committee, however, regret to state that this impression is not borne out by the accurate observations taken of the local conditions of the disease, which in all cases are markedly worse.

"The committee are unable to report that they have seen anything at all in the Mattei system, either in its methods or in its results, which tends to differentiate it favourably from other so-called "cancer cures," which have invariably been found in practice to fail, or that the Mattei remedies are of any avail in the treatment of cancerous disease.

"The committee desire to state that the patients have been aware of the nature of the experiment, and that they have been strongly advised on the part of the committee to seek surgical relief, which they have been fully at liberty to do at any stage of the investigation."

Several points here are worthy of remark.

1. It is affirmed in June, 1892—a year after treatment had begun, and three, four, and five years after the disease had appeared in three of the cases—that "in *all* the patients the disease is in an early stage." Now, let all intelligent readers contrast this with the description of each case when under-

taken a year previous—nay! with the description given here by the committee itself. The report runs: "In one chronic case the advance has been slow, but perceptible; in three cases, moderately rapid; while in a fifth the progress of the disease has been very rapid!" They were admittedly all in the *second* stage at the outset, and one case very much advanced!

2. Mark this well. "The patients gave a favourable account of their feelings, and believed they had derived benefit." Read again their description of their case at first, and the account which they severally gave themselves at the end of one year's and two years' treatment, and say whether they are intelligent, trustworthy witnesses, and capable of knowing whether they had derived benefit or not.

3. "The committee strongly advised the patients to seek surgical relief," but (poor things!) they severally and unanimously elected to continue under the treatment which had done so much (or so little, according to the committee's report) for them during the preceding year.

4. *Three* of these patients lived three years from the commencement of their treatment (one dying from acute poisoning, and another from successive attacks of influenza and bronchitis, in a year and at a time when there were many deaths from these causes of people strong and healthy), whilst *two* (and of them one of the *worst cases* at the commencement of the investigation) lived over six years, and never once had they any of the caustic pastes or burning treatment common to *cancer curers*; and yet this distinguished committee had the face to write: "The committee are unable to report that they have seen anything at all in the Mattei system, either in its methods or in its results, which tends to differentiate it favourably from other so-called 'cancer cures' which have invariably been found in practice to fail,* or that the Mattei

* Will the reader turn back for a moment to p. 11, and read what Mr. H. T. Butlin has given as his candid opinion on this point, beginning at "No severer denunciation," etc?

remedies are of any avail in the treatment of cancerous diseases."

There are none so blind as those who won't see Should the surviving members of this committee condescend to read the later history of these cases, I think they will be somewhat disposed to alter their views, and severally cry, "Peccavi!" At all events, the British Public will form its own opinion.

PROFESSOR STOKES'S ANALYSIS OF COUNT MATTEI'S ELECTRICITIES.

FOLLOWING up these test cases it cannot be out of place to refer once more to the extraordinary analysis of some three of Count Mattei's liquid medicines, designated *electricities*, which has been published round the world, and declared by the distinguished analyst and his employer to expose them righteously to the scorn and derision of all mankind. I will print it in its entirety, and I only wish I could print it in letters, a thousand miles deep, across the sky, so that wherever it was sent in hot haste it might be read once more at calm leisure.

Analysis of Count Mattei's Electricities.

"DR. HERBERT SNOW presents his compliments to the editors of *The National Review*, and begs to enclose an analyst's report upon three of the Mattei "electricities," procured from Messrs. Leath & Ross.

"'ANALYTICAL LABORATORY,
"'VESTRY HALL, PADDINGTON GREEN, W.
"'*October 21st*, 1890.

"'DEAR SIR,—On October 2nd I received from you three small bottles bearing the Government patent-medicine stamp, each securely sealed with a wax, unbroken seal of a castle on a rock. I have now carefully examined these chemically, physically, and microscopically, and I find as follows:

"'They were labelled "Elettricita Bianca," "Elettricita Verde," and "Elettricita Rossa."

"'To find if they possessed any special electrical properties they were placed singly in thin glass tubes; these tubes were suspended by silk filaments. Under such circumstances an electrical body would point one end to the north and the other end to the south. Not one of these came to rest in such a position; neither were any of them attracted by a magnet as an electrical body would be. Hence, they certainly are not electrical.

"'To delicate test-paper they were perfectly neutral. Vegetable extracts are usually either alkaline or acid; even if neutral when fresh, they speedily change.

"'They had the following characters:

	Elettricita Bianca.	Elettricita Verde.	Elettricita Rossa.
Colour	None	None	None
Odour	None	None	None
Taste	None	None	None
Polarity	None	None	None
Specific gravity (distilled water = 1)	1·0006	1·0002	1·0002
Solid matter in 100 parts	0·01	0·01	0·01
Metals *	None	None	None
Alkaloids	None	None	None

"'The microscope showed an absence of any floating particles or sediments such as are usually present in vegetable extracts.

"'There is but one substance which possesses all the above qualities, that is, *water*.

"'None of these fluids differ at all from water in any of their properties.

"'Yours faithfully,

"'ALF. W. STOKES, F.C.S., F.I.C.

"'Public Analyst to Paddington, Bethnal Green, and St. Luke, Gas Examiner to London County Council, etc.

"'DR. HERBERT SNOW.'"

* By metals is meant any foreign to water, or any such as are used medicinally.

Now the merest tyro in a Board School's third or fourth standard, if this were set before him, and he were asked if this were correct, would discern at a glance its glaring inconsistency, and as a matter of evidence, laugh it to scorn; and yet it has been telegraphed all over the globe in the interests of the profession, and scores of sensible men have professed to believe it; at all events, they have not hesitated to assert, as if it were true, that its conclusions are well founded, and destroy the claims still made in behalf of these liquid electricities.

If I were to ask this lad further wherein it is inaccurate, he would speedily rub out certain of the figures which it contains, and insert something entirely different, on this wise:—

	Elettricita Bianca.	Elettricita Verde.	Elettricita Rossa.
Colour	None	None	None
Odour	None	None	None
Taste	None	None	None
Polarity	None	None	None
Specific gravity (distilled water = 1)	1	1	1
Solid matter in 100 parts	None	None	None
Metals*	None	None	None
Alkaloids	None	None	None

The learned analyst could detect "no odour." Yet such is for the most part present when the bottle is first opened, and of a disagreeable nature, too—that of sulphuretted hydrogen! Neither, even with the help of a *microscope*, could he find "any *floating particles* such as are usually present in vegetable extracts." For the most part these are visible to the naked eye, and many a time I have had to filter these fluids to get rid of these floating particles, and to advise patients whose naked eyes had discovered too many and made them imagine that the electricities had gone wrong to do the same; so that on every ground I confidently appeal to every intelligent reader to reject

* By metals is meant any foreign to water, or any such as are used medicinally.

this analysis, as an insult to his common sense. Indeed, I wonder how the learned professor could write it! or Dr. Snow accept and send it forth to the world with the sanction of his name! Professor Stokes frankly owns that he only examined these fluids "chemically, physically, and microscopically." Not once did he put any one of them to an *experimental* or physiological test (or inquire how he might do so), which would speedily have altered his opinion of their character and value. This I challenged at the time, and I have repeated this challenge over and over again, even offering five guineas a gallon for every gallon of *distilled water* he could send me possessing the properties of these fluids.

Some time previous to the issuing of this so-called "analysis," and during the "cancer controversy" that gave rise to it, a medical man in the Midlands in a large practice had been proving these liquids, and thus wrote to me: "I have had my arthritis patient in, and he says the compress of green electricity removed his pain at once, and he has had no return of it." Surely if Dr. Snow had availed himself of his opportunities of making such experiments he would never have set Mr. Stokes to work in the direction he has done, and would have saved both himself and Mr. Stokes the mortification of feeling that they had both tried how not to do it, and of appearing ridiculous before the world, and utterly incapable of investigating a simple problem which was plainly set before them in the paper to which they were formulating their crushing reply. I can imagine my setting two clear fluids before these learned investigators, the one water, the other petroleum (a liquid which I will assume the analyst had never handled before), and I ask him to describe to me its properties. He will soon tell me its density, smell, colour, taste, reaction, with wonderful precision, and probably add, "These are all its known properties," whereas I know it to be explosive and inflammable. If I have concealed this from him I need not be surprised at the defective character of his analysis; but if I had told him in the outset that its main

and, in an important sense, its sole characteristic was its inflammability, he would most certainly have gone about his work in a simpler and more intelligent fashion, and his report would have read very different. Here I must leave the learned doctor and the distinguished analyst to their own reflections, and to settle between them the respective meed of praise or discredit that is due to them.

A PRACTICAL EXPERIMENT.

I was greatly interested a few years ago when visiting the chief city of one of our Australian colonies. A very intelligent young physician afforded me an admirable opportunity to illustrate this at the close of a lecture I was giving to a number of people interested in Count Mattei's treatment. He stepped forward, and politely challenged a proof of the special power of one of these fluids—the blue electricity, for which I had claimed the power of speedily arresting minor hæmorrhages. He opened a knife and made an incision near his wrist, from which the blood flowed freely. I took up a water-bottle standing on the table and poured a little water slowly upon the wound, which only made the blood flow the faster. I then moistened a small square of lint with the blue electricity and placed it on the spot, and asked a gentleman close by to look at his watch and allow me thirty seconds. On his exclaiming "now," I removed the lint, and the bleeding had completely ceased! Accosting him I said, "Are you satisfied now that this is something more than water?" (holding up the phial in my hand), when he frankly replied, "Oh yes; there must be something very different from water in that fluid."

And this is the true and only method of determining the truth in this matter. As Sir James Paget happily expressed it in his Morton Lecture with reference to some desirable discovery of a remedy for the sad disease of cancer: "It must be both *clinical* and *experimental*, and probably the latter will be more fruitful."

As an indication of the far-reaching influence which this indefensible analysis has exerted on the minds of even intelligent men, it may be stated that in the recent April number of *The Practitioner*, a number devoted entirely to the admittedly alarming disease of cancer, the editor or writer, in discussing methods of treatment outside that which is accounted the only, because orthodox, way of dealing with this disease, affirms: "Of the Mattei treatment, the latest, and in some ways, the worst fraud among cancer cures, there is no need to say much. The bottled electricity of the Italian quack, whether *blue*, *green*, or *yellow* (and he might have added, to complete the list, *white* or *red*), was shown to be nothing but water." Had he used the word "asserted" instead of "shown" he would have spoken the truth.

I might also add, in this connection, that attempts have been made to analyse homœopathic tinctures, and the finest tests have failed to discern the ingredients therein beyond the sixth dilution, whilst some of the most extraordinary cures on record have been made by the *thirtieth*.

WHAT REFORMS ARE NECESSARY.

As to the measures that would lay an immediate arrest on this steadily increasing and alarming mortality I am bold to affirm :—

First, that if all *surgeons* would recognise and admit that cancer is a disease of the blood and lay aside their *knives*, and seek for and employ some healing remedies, from whatever quarter they may come (such as the late Sir James Paget longed for), a good beginning would be made in this direction. Indeed, there are indications that this day is dawning, as we may infer from the following report of *The Glasgow Herald* some few months ago.

"The annual meeting of the Glasgow Cancer Institution was held this afternoon, when Dr. Hugh Murray, the surgeon in charge, giving in his report, spoke strongly against the use of the knife in cancer disease." The operating mania that had characterised the profession for the last half-century had caused the treatment of cancer to reach a stage that amounted to the stagnation of scientific research. If excision eliminated the disease, it was difficult to see how the death-rate from cancer should be steadily increasing. He noted also the singularly small number of medical sufferers from cancer, and had been often asked, "May it not be due to the privilege conferred by statute upon the profession to certify the cause of death?" He considered that unwittingly many of them might be led on to error in this matter, and, quoting Mr. Butlin, referred to 364 patients, of whom 238 died, due to operations, and of the 126 who recovered the majority died within twelve months, although very eminent surgeons conducted these

operations. This led him to ask, "Were these deaths due to the cancer or the operation?" and he pointed out that if death was registered from cancer when it really followed operation it was a grave injustice to the families of those patients, since for one thing it debarred them from the full privileges of life insurance, and besides, left them to go in bondage all their days through fear of death by cancer. He made a bold appeal that the knife should be sheathed and therapeutic remedies found. It was, he contended, quite a mistake to suppose there was no such thing as the natural cure of the malady, or that unless patients accept the knife they must die."

I affirm, further, that if all *women* especially would recognise that a large proportion of all cases of cancer in the breast—and they constitute by far the larger number of cancer cases—are due to *tight lacing*,* and lay aside their fashionable stays and wear only such slight corsets as would support their bodies without strangling their circulation, a tremendous stride forward would immediately follow; and I affirm, finally, that if all fresh cases of tumour, as soon as they are discovered, were placed early under Hahnemann's homœopathic or Mattei's homœopathic treatment,—these *three* conditions united, we firmly believe that the mortality from this disease would be diminished by at least *fifty per cent.* within five years; and believing this, we cannot cease to proclaim it in the ears of a suffering world. As to internal forms of the disease, which

* At a "Woman's Congress" recently held at Nottingham, Viscountess Harberton read a paper on "The Hygiene of Dress," and said, amongst other things, that "Women's dress, instead of being a help and a protection to the wearers, was just the contrary, and owing to its construction was not only heavy and exhausting for walking, but as it trailed into all kinds of filth in the road, it distributed disease germs in the form of dust over the house, which germs were in due course inhaled by all the inmates. A violent and unnatural constriction in the centre of the body injured and congested the internal organs, but the fact was disregarded owing to the compression being considered decorative. Corsets ought to be classed with elastic stockings, and only used for figures requiring abnormal support."

are far more distressing and speedily destructive, I fearlessly affirm that the ordinary treatment of congestions and ulcerations of the womb by scarification and scrapings and applications of fuming acids and caustics, and of piles and polypi (wherever situated) by snaring, twisting, and burning, is the fruitful source of a large proportion of the *malignant* development of disease in the regions thus affected; so that, what at first might have been got rid of by milder and *medicinal* measures, becomes a source of incurable disease, and of premature and painful death.

During the past ten years I have seen hundreds of such cases which had no other origin, and could have no other end. Even a *wart* or *mole* on the face or forehead, or the slightest diseased condition of the skin, lupoid in its character, because of its situation, is attacked with the knife, or fuming acid, or the actual cautery, so that what was simple and non-malignant previously is developed into a slowly devouring *lupus* or a rapidly diffused and destructive *sarcoma*. It is by no means rare to find even a small *ganglion* on the wrist, contracted by tennis or cricket (which simple treatment will remove in a few days), forcibly ruptured with a blow, or cut out with a knife, with the result that the power of the hand is lost for ever. Medicine has always been esteemed a *healing* art, yet in scores of cases in which it is perfectly able to deal with comparatively trifling ailments, they are being increasingly withdrawn from the *physician's*, and relegated to the *surgeon's* care.

And this is true also of cases much more serious. Many a congestion of important internal organs, which would have yielded eventually to the administration of suitable remedies, combined with suitable applications, are subjected to operative treatment, which eventually robs the patient of future happiness and power. Not a few of those cases which are utterly despaired of from the outset, and declared by distinguished surgeons to be absolutely hopeless, have been successfully combated and radically cured by means of Hahnemann's and Mattei's homœopathic remedies. And yet those who have heard all this,

and should rejoice to investigate and adopt the means that have accomplished such results, refuse to consider them, and endeavour to account for the cures thus accomplished by the positive assertion that they cannot have been genuine cases of cancer or tumour after all, and that the excellent men who believed them to be so, and treated them as if they were, must have been "*mistaken in their diagnosis.*" But this is neither consistent with the spirit of true science or true humanity! The language of those who are responsible for the lives of men and women should rather be, "though the heavens fall, let the truth be proclaimed"; though the loftiest names in the profession be brought low, and the most approved methods hitherto adopted, and now in use, must of necessity be abandoned, and newer ideas and methods take their place, why should it not merely be acquiesced but glorified in?—if only, thereby, the sufferings of humanity be decreased and the lives and usefulness of loved ones prolonged.

Even as respects the *prolongation of life*, and *the abatement of pain*, there are thousands now in these islands and in our distant colonies who can heartily testify that they themselves or their suffering friends have enjoyed incalculable benefits by the use of these medicines, which otherwise they had never enjoyed. And yet the whole power of the profession has been put forth in every possible form, by the instrumentality of the press, by the persecution of avowed advocates, by the making of bold assertions that are incapable of proof, by the issuing of alleged analyses of the medicines which are self-contradictory and absurd, so that by all and every means they may sweep into oblivion all who believe in and use these remedies. Still, "great is the truth, and it must prevail."

PROFESSIONAL PERSECUTION—NOTHING NEW.

In times gone by some of those who made the grandest discoveries the world had yet known have been exposed to the most bitter persecution and pursued with relentless fury even by their own *confrères* to the end of their days.

Harvey, who first discovered the circulation of the blood, was styled "vagabond and quack," and persecuted through life. Ambrose Paré, in the time of Francis I., introduced the *ligature* as a substitute for the painful mode of stanching the blood after the amputation of a limb—namely, by applying boiling pitch to the surface of the stump. He was, in consequence, persecuted with the most remorseless rancour by the Faculty of Physic, who ridiculed the idea of putting the life of man upon a thread, when boiling pitch had stood the test of centuries! Paracelsus introduced *antimony* as a valuable medicine; he was persecuted for the innovation, and the French parliament passed an Act, making it penal to prescribe it; whereas it is now one of the most important medicines in daily use. The Jesuits of Peru introduced to Protestant England the *Peruvian bark* (invaluable as a medicine); but, being a remedy used by the Jesuits, the Protestant English at once rejected the drug as the invention of the devil. In 1693 Dr. Grönvelt discovered the curative power of *cantharides* in dropsy. As soon as his cures began to be noised abroad he was committed to Newgate by warrant of the President of the College of Physicians for prescribing cantharides internally.

Nitrous Oxide Gas.

In later years "*nitrous oxide gas*" was first successfully used by Horace Wells, a young dentist of Hartford, Connecticut —I am now quoting from a lecture by Dr. Stephen Mackenzie in October, 1896: "At first it proved unsatisfactory. T. G. Morton,

with whom Wells worked, tried *sulphuric ether.* Its power of stupefaction had been known before, but not its *anæsthetic* power. After its first exhibition Dr. H. Bigelow said to a physician, whom he met later in the day, 'I have seen something to-day that will go round the world.' It was a true prophecy; but what of the discoverers? To Morton himself the discovery brought little but disappointment and vexation of spirit. He died bankrupt and broken-hearted before he completed his forty-ninth year. Jackson, of Boston, whose pupil Morton had been, suggested to him sulphuric ether as likely to prove more successful than the nitrous oxide; and we are told that Jackson, by reason of the contemporary claim to the discovery, like Wells became insane, and after lingering years, died in an asylum."

Ether—Chloroform.

Ether was first used in Sir James Simpson's house on November 4th, 1847, and in the Edinburgh Infirmary on November 15th following, and finding its use objectionable by reason of its persistent disagreeable odour attaching itself to those who used it, Sir James set himself to discover something better than ether, and he succeeded in doing so, and named the new agent *chloroform.* "Strange to say," says Dr. Mackenzie, (by no means strange, say I) "the introduction of chloroform met with great and violent opposition in many quarters. It was not received with enthusiasm by the profession. *Surgeons* were inclined to look askance at a thing which came from an *obstetrician.* Fanatical clergymen denounced its use in labour as an impudent attempt to evade the curse pronounced by the Almighty on Eve and all her daughters. Simpson fought these men with their own weapons, and pointed out that the first operation we ever read of was performed under an anæsthetic by God Himself—when He cast Adam into a deep sleep before removing his rib"; and to Sir James Simpson belongs the merit of having made *anæsthesia* triumph over all

opposition. He had once the privilege of attending Her Gracious Majesty, who set her seal of approbation upon the great discovery by conferring upon its author a baronetcy, when he selected for his motto upon his coat-of-arms, "*Victo dolore*" ("pain conquered").

Lady Mary Montague

first introduced into England small-pox inoculation, having seen its success in Turkey in greatly mitigating that terrible disease. The faculty all rose in arms against its introduction, foretelling the most disastrous consequences; yet it was in a few years generally adopted by the most eminent members of the profession.

Jenner,

who introduced the still greater discovery of *vaccination*, and performed the first successful operation in May, 1796, was treated with ridicule and contempt, persecuted and oppressed by the Royal College of Physicians; yet he subsequently received large pecuniary grants from Government for the benefit he had conferred on his country by making known his valuable discovery; and at the present time its observance is very properly advocated by the whole medical profession, though recently the legislature, in an evil hour, have made its observance optional.

"The centenary of Jenner's famous discovery was celebrated in a manner befitting its importance in the history of mankind in 1896 in Germany, Russia, and the United States" (so writes the editor of the *British Medical Journal* at the time); "and here," he asks, "what is being done to do honour to the memory of Jenner? Nothing! We are a practical people, and leave that kind of thing to sentimental foreigners. Is it not written that 'a prophet is without honour in his own country'?" We have awakened at last, however; but three years ago, at a public meeting presided over by the late Lord Herschell,

the chairman proposed, and Professor Michael Foster seconded, the following resolution, which was carried unanimously: "That the time was appropriate to inaugurate a work of national utility in honour of Edward Jenner." A second resolution, moved by Lord Lister, and seconded by Lord Davey, was also unanimously adopted, deciding that "a *national* subscription should be set on foot, to promote—in connection with the British Institute of Preventive Medicine, but distinguished by Jenner's name—researches on the lines which he indicated." An appeal was to be issued immediately, and the sum asked for be (a modest) £100,000! Not many weeks passed when Lord Iveagh responded to this appeal in a munificent fashion—having presented no less a sum than £250,000 to establish this institute and provide for this research. Truly, an awakening has come, and it powerfully illustrates and explains the old adage, "The fathers stoned the prophets, and the children garnish their sepulchres."

LEGISLATIVE INTERVENTION REQUISITE.

We have thus endeavoured to point out and emphasise the terrible drain on the best life of the nation, arising from the persistent treatment of all cancerous tumours by *operative* measures, and I think the alarming but incontestable statistics of the Registrar-General fully justify me in using the strongest possible language in denouncing their continuance, and demanding, in the name of God and humanity, that they shall cease at once and cease for ever—that the rulers of the nation who have in time past enacted, and should continue to enact, wise and wholesome laws for the prevention and extinction of that other dreadful scourge where it finds free swing, I mean small-pox, shall take similar measures with reference to this terrible and ever increasing disease of cancer.

Why should not our rulers at once appoint a "Royal Commission" to investigate this whole subject and examine every

witness that can throw any fresh light upon its treatment; and especially insist upon a fair, honest, and unprejudiced trial of any means or measures, whether "pharmacopœial" or "extra-pharmacopœial," concerning which trustworthy men and women can testify that their lives have been greatly prolonged and even saved thereby?

BUT IS THE PRACTICE OF MEDICINE MORE SUCCESSFUL?

Not alone would I plead thus earnestly with reference to the pre-eminently destructive disease of cancer, the only one in which the skill of the surgeon, who is allowed to deal with it, seems to be utterly at fault, but there are many other diseases of a most destructive character, constitutional, epidemic, infectious, falling within the sphere of the physician, which appear to be equally unaffected by the alleged wondrous discoveries made in medicine during Her Majesty's reign—nay! many of which (in defiance of all the accumulated experience of successive generations of highly qualified practitioners, and all the new resources of offence and defence in the domain of disease) still remain not only unaffected and even unmodified in their course, but prove more fatal from year to year.

That I may not be accused of wild and unwarranted assertions as well as of gratuitous slander, I will now set before my readers a clear statement of the *results* of medical treatment during the Queen's reign under three different aspects, as exhibited in the authoritative pages of the Registrar-General's Annual Reports, which I think will acquit me of the charge of having set aught down in malice.

DISEASES STEADILY ADVANCING, SOME BY LEAPS AND BOUNDS, DESPITE THE MARVELLOUS PROGRESS CLAIMED FOR MEDICINE.

Disease.	Mortality per Million of the Population.						
	1837.	1847.	1857.	1867.	1877.	1887.	1897.
Pneumonia	832	1,304	1,230	995	959	1,113	1,122
Apoplexy	386	437	439	490	538	573	574
Diabetes	6	21	25	31	41	63	78
Acute Nephritis ...	8	9	14	21	36	44	73
Pleurisy	32	69	46	41	45	58	48
Bronchitis	...	916	1,341	1,902	2,187	2,117	1,508
Enteritis	...	257	179	135	105	131	427
Aneurism	...	15	17	24	33	27	28
Bright's Disease ...	...	...	52	104	193	246	265
Insanity	...	...	27	30	61	89	119
Rheumatic Fever ...	...	...	51	...	61	95	81
Diphtheria	...	...	82	120	111	160	246
Rickets	...	...	...	...	14	24	46
Paraplegia	...	...	...	...	25	66	71
Otitis	..	...	...	...	9	15	29
Endocarditis	...	...	...	...	10	264	343
Senile Gangrene ...	...	...	...	...	23	51	41
Embolism, Thrombosis	...	...	...	...	16	34	42
Disease of Stomach ...	...	...	...	...	38	123	162
Gall-stones	...	...	...	...	6	11	14
Disease of Lymph System	...	..	...	...	1	7	9
Disease of Thyroid Body	...	...	...	...	3	5	8
Anæmia	...	...	...	...	30	47	60
Angina Pectoris ...	...	...	...	...	18	22	23
Cirrhosis	. .	...	...	...	112	120	133

N.B.—Where there are blank spaces, there are no returns.

SERIOUS AND EXTENSIVELY FATAL DISEASES, WHOSE MORTALITY IS ABOUT STATIONARY, AND VERY SLIGHTLY AFFECTED BY THE MARVELLOUS PROGRESS CLAIMED FOR MEDICINE.

Disease.	Mortality per Million of the Population.						
	1837.	1847.	1857.	1867.	1877.	1887.	1897.
Measles	676	507	310	304	366	602	409
Whooping cough ...	434	540	526	548	460	404	368
Hernia	36	47	43	44	44	44	42
Laryngitis	...	42	71	61	39	58	41
Peritonitis	...	75	74	74	80	85	64

DISEASES MATERIALLY AFFECTED BY MEDICAL AND SURGICAL TREATMENT, BUT MORE, AND MAINLY, BY VACCINATION, SANITARY LAWS, IMPROVED DWELLINGS, AND BETTER NUTRITION.

Disease.	Mortality per Million of the Population.						
	1837.	1847.	1857.	1867.	1877.	1887.	1897.
Small-pox	415	246	202	114	173	18	1
Typhus	1,206	1,078	957	193	45	8	2
Erysipelas	68	113	83	69	84	67	33
Rheumatism	62	76	38	106	84	35	29
Croup	222	185	277	207	158	143	35
Quinsy	40	30	25	9	11	25	17
Gout	30	15	12	18	27	21	18
Convulsions	...	1,532	1,286	1,239	978	778	592
Ulcer. Intestines ...	...	37	47	44	50	15	11
Mortification	...	82	59	63	26	3	1
Pericarditis	...	29	30	28	19	19	18
Ascites	..	38	39	34	20	10	4
Phthisis	...	...	2,627	2,595	2,079	1,615	1,341
Tabes Mesent. ...	...	...	282	324	316	253	201
Acute Hedroc. ..	...	...	393	382	319	236	213
Dropsy	...	...	443	334	111	12	4
Epilepsy	...	...	115	109	118	107	81
Diarrhœa, Dysentery	...	...		937	619	727	840
Scarlet Fever ...	...	...	...	567	585	282	147
Enteric Fever ...	...	...	...	390	279	185	156
Simple Fever ...	...	...	...	...	78	18	4
Pyæmia	..	...	...	...	24	12	10
Emphysema	...	...	...	...	100	89	72
Strang. Intestines ...	...	...	...	...	19	7	5
Dyspepsia	...	...	...	...	14	19	8
Calculus	...	...	...	...	10	9	9

N.B.—Where there are blank spaces, there are no returns.

NOW, WHEREIN IS SEEN, AND WHENCE ARISES, ANY SUCCESS?

At the recent Sanitary Congress at Southampton Mr. Malcolm Morris delivered a lecture on *Tuberculosis* before the section for "Sanitary Science and Preventive Medicine." He said: "It was true that the ravages of tuberculosis were less terrible than formerly. The records of the Registrar-General showed that while in 1838 the death-rate from consumption was more than 3,800 per million of the population, in 1896

it had fallen to 1,305. He thought there could be no doubt that the diminution had been due to land drainage and other measures of sanitary reform, and to the betterment of the general conditions of life among the working classes which had marked Queen Victoria's reign. No special measures had hitherto been employed aiming directly at the extinction of the disease [and why not?]; but it was worth while [and high time] to assume the aggressive, and to complete the victory which the defensive warfare of sanitary reform had already half won." "*Ex uno disce omnes.*"

It thus authoritatively appears that sanitary, hygienic, and preventive measures have done wonderful things during the past sixty years; but to speak of the progress of medicine as "a great healing art," or to proclaim its triumphs, would be but an ill-disguised sarcasm—a very anachronism!

I will not set forth here, as it would be superfluous, the proud boasts that have been made of late years by distinguished physicians when chanting the praises of the wondrous advance made in the medical world by means of the stethoscope, microscope, thermometer, sphygmograph, and unnumbered new *remedies* dressed up in homœopathic forms (differing in shape only, but designated *tabloids* instead of *pilules*), which have expanded if not enriched the previously plethoric pharmacopœia; but I will present the opinions of a few distinguished members of the profession, who are entitled to speak and testify what they have seen. I will set forth the opinion of a very distinguished living physician,

Sir William Gairdner, K.C.B.

who was once Physician in Ordinary to Her Majesty in Scotland, and is, I believe still Professor of Medicine in the Glasgow University.

When delivering the lecture on Medicine at the meeting of the British Medical Association at Dublin in August, 1887,

the year of the Queen's Golden Jubilee, he proposed to himself for discussion the momentous and startling question, "Has the art of medicine advanced during the present century?" Very early he asked another question—*viz.* "Are there *any ruling principles* at all throughout this vast field, or is it a mere aggregate of laborious investigations, guided by no common purpose, no fixed or polar star?" To which he replies: "There can only be one answer. No such exclusive or single principle or law of the healing art can be said to exist. The action of remedies, the resources of hygiene and of preventive medicine, refuse to submit to any formula comparable in its simplicity with that of the law of gravity." Evidently he had Hahnemann's grand discovery in his mental vision here—"*Similia similibus curentur*," which is as simple and as certain as "the law of gravity." But of this again!

"Now," Sir William Gairdner proceeded, "the healing of diseases is still largely *empirical* [the italics are mine], and what is more, takes no shame to itself for *being* and *remaining* so." He further refers to a doubting and mocking query suggested by the late Sir William Hamilton, in an article reviewing the writings of Cullen—*viz.* "Has the practice of medicine (*i.e.* the art as distinguished from the science) made a single step since the days of Hippocrates?" (He lived four hundred years before Christ!) He narrates that Dr. Warburton Begbie, one of the most distinguished physicians of this century, addressed himself with a wonderful amount of erudition, and certainly with great tact and skill, contrasting modern with ancient practice, to the advantage of the modern. "I was much instructed by his answer at the time, yet it would scarcely be correct to say that I was satisfied with it. A fair case was made out on behalf of certain modern inventions and improvements, but the history of *progress on the whole* was not so clearly displayed—perhaps, indeed, could not have been at all adequately displayed, after the manner attempted. I think the outcome of the whole was scarcely that of an effective answer to Sir

William Hamilton's mordant suggestion.* It was much more easy to show that we *know more* than that we *cured better* than Hippocrates and Galen. [Surely this fully admits Dr. Begbie's contention.] I never had and have not now any doubts on the subject; but if I had gone to work in the spirit of Sir William Hamilton, I think it would not have been difficult, after the manner of the *advocatus diaboli* before the Roman Curia, to have made out something like a case in answer again to Dr. Begbie." Evidently Sir William had statistics in his mind's eye such as we have supplied above, though he made no reference to them. This is certainly a frank enough admission to make in the year of our Lord 1887, and of our Gracious Majesty's Golden Jubilee. Quoting a paragraph from a former lecture by himself on a kindred subject, giving it thereby a double emphasis, he added: "The art of medicine is at this moment in a peculiar position. The day of orthodoxies is over. The day of real science is only just dawning. It is no longer possible to condemn a man, even by implication, for having ceased to believe what our fathers believed [would that this were true!]; "but it is extremely difficult to state in general terms *what we believe ourselves*, and *still more difficult* to forecast the future, and *to lay the foundation of the faith of our successors.*" Drawing to a close, he makes this pleasing boast, which, I fear, not many nowadays would subscribe to: "It is one of the privileges of our art that our freedom of opinion is such that we can afford to absorb into our daily practice, and even into our theories of disease, the instruction that comes even from the most erratic and monstrous of heresies, no man making us afraid." And frequently this is done unstintedly as regards Hahnemann's grand teachings without acknowledging the source from which it comes, and the day may not be far distant when Count Mattei's confections and distilled waters for the relief of pain may be annexed and absorbed also.

* See *The British Medical Journal* for August 6th, 1887.

Dr. Whitla, of Belfast.

At the same meetings Dr. Whitla, of Belfast, delivered a lecture on Therapeutics and Pharmacology. Among other things he said: "With more time at our disposal we might easily dwell upon the numerous and inestimable advantages which would accrue to the science of medicine if there could be devised some method by which therapeutic experience could be lifted out of its present unsatisfactory and somewhat chaotic condition into a higher and better ordered system. In addressing medical men I need not refer to, much less dwell upon the fact that the great object of our art is the successful treatment of disease; this being our *raison d'être*, it does seem wonderful and painfully suggestive that for every hundred pages of our medical literature there can scarcely be said to be as many lines devoted to the subject of the *treatment* of disease."

Sir Dyce Duckworth,

at the meeting of the British Medical Association at Carlisle in 1896, struck the right key-note when he confessed: "The education of to-day is rather overladen with details and barren of the inculcation of general *principles*. Hence, I fear, we come short in the production of men equipped to think for themselves and to help in carrying forward our art towards greater completeness and perfection." This is the deliberate utterance of one who speaks with authority and not as an outsider. Indeed, not less clearly does Dr. Snow, in his "Twenty-two Years' Experience," attribute the blame of the ever increasing mortality in cancer to the "defective education and unpreparedness of by far the larger majority of surgeons who are entrusted with such operations," than Dr. Dyce Duckworth bewails the paucity of the men who are really "equipped to think for themselves," and, I will add, *think for their patients also!*

Sir J. Ewart,

at Carlisle in 1896, admitted, with reference to that terrible disease for which the newly discovered antitoxin was being lauded to the skies as a perfect cure: "It does not seem that diphtheria has been diminished by hygienic or sanitary measures. Indeed, till this year it seems to have been steadily on the increase. Measles, whooping-cough, and influenza are equally untouched by them, and," he innocently asks, "why should not the time come when small-pox [surely this has arrived already], typhoid, consumption, and scarlet fever [and he might have added diphtheria, yea, and pneumonia also] might be as effectually combated as have typhus, scurvy, plague, and leprosy?" Beyond a doubt hygienic and sanitary measures have done wonders in several of these diseases; but the triumphs of medicine as allopathically discovered and administered during the Queen's reign have been very few and far between, as the Registrar-General's Annual Reports painfully testify.

The treatment of these very diseases, and many others equally as serious, by homœopathic and Mattei's homœopathic remedies (for I regard them simply as such) have yielded infinitely better results. Take, for instance, that terrible scourge, "pneumonia," which is carrying off every other day in our own land (and perhaps even more frequently in the United States of America) the brightest of our nation's sons in the zenith of their strength and usefulness—for 'tis the sons rather than the daughters who are chiefly liable to be assailed by this most fatal of diseases, as yet under old-time treatment. *Bleeding* and *blistering*, *leeching* and *cupping* we had imagined (with some remarkable exceptions) to have been abandoned long ago by the profession as utterly unavailing to save men alive (at least, so we have been frequently assured); but we find we have been misinformed, and that they are still in vogue with the full sanction and approbation of one of the most distinguished of our present-day physicians.

Sir Douglas Powell, M.D., F.R.C.P., etc.,

Physician Extraordinary to Her Majesty the Queen, Senior Physician to the Middlesex Hospital, and Consulting Physician to the Hospital for Consumption, Brompton, having been invited to introduce the subject of Pneumonia for discussion by the Council of the British Medical Association at its annual meeting in 1895, began his elaborate paper by expressing the "wish that, in response to the flattering invitation of the Council, he could report some notable diminution in its mortality, and some more strenuous measures to be adopted for its prevention and treatment."

At the outset he placed an elaborate chart upon the blackboard, with tables arranged so that the death-rate from pneumonia might be placed on the one side, and the total death-rate from all zymotic diseases on the other, through twenty years, and added: "A glance at this table will show that whilst in the last, as compared with the preceding decade, the death-rate from zymotic diseases has very greatly declined, that from *pneumonia* still holds its own at 24,000 and upwards; the mortality from *phthisis* has also been shown by the statistics of Longstaff in the same time to have diminished by about 18 per cent., yet *pneumonia* (the claims of which to classification amongst 'zymotic' diseases have become much stronger of late), still frustrates our preventive and therapeutic measures.

"Pneumonia stands out with too appalling conspicuousness in the frequency with which it attacks the maturely useful members of the community (Table I.), one-third of its death-rate occurring at that period of life when the individual is in the zenith of working power for the family and the community, and apparently in the fulness of health and vigour, thus causing many an almost sudden bereavement in the midst of apparently unclouded happiness and prosperity. Pneumonia, then, is a disease which the Council has well selected for special consideration at this Congress."

After having discussed this sad disease in all its bearings with an erudition which must have gratified his distinguished and learned audience, he proceeded to discuss the "Elements of Danger in Pneumonia," and set forth in due order the measures he would adopt, and suggest for the guidance of men less experienced in the healing art, when they should be called upon to deal with this disease so full of danger. I will present the teaching in the table just as it appears in *The British Medical Journal.*

The British Medical Journal.

Nov. 9th, 1895. ACUTE PNEUMONIA. 1153

Symptomatic.	Pathological.	Effects.	Treatment.
High fever, above 104°.	Microbic activity. Exhausted nerve-centres.	Shock. Sleeplessness.	Bathing; quinine. Morphine, preceded by accumulative stimulants and food.
Pain.	(1) Over-distension of capsule of lung from exudation and hyperæmic swelling.	Nervous Exhaustion.	*Leeches*; ice applications.
	(2) Pleurisy.	...	*Blister* hot poultices (except very young and very old persons).
Rapid pulse (120) and breathing (40).	(1) Impaired pneumogastric innervation.	...	Strychnine, caffeine, atropine.
	(2) Impaired nutrition of heart from insufficient and badly aerated blood supply.	Cardiac failure.	*Oxygen inhalations* (earlier employment).
	(3) Over-distended right cavities.	...	Stimulants.
	Depleted left cavities.	...	Digitalis and strychnine; *blood letting, local or general,* portal depletion.
Extending Physical signs.	Extending exudation.	..	Acid tonics, perchloride of iron, after fifth day; *oxygen inhalations* (later employment).

N.B.—The above table is designed to show in brief the elements of danger in severe cases of pneumonia, and to indicate the lines of action to meet or anticipate them.

I must confess I was astounded when I read this suggested treatment, and wondered little that "the maturely useful members of the community, and apparently in the fulness of health and vigour," are so suddenly snatched away. But let the Registrar-General answer this same question after his own unbiassed fashion. Figures, it is often alleged, can be made to prove anything! But I think the single line in which the mortality from pneumonia is set forth in our Blue Books proves to the hilt the painful allegation we are compelled to make, that so far from mortality being lessened by the wonderful discoveries of the Queen's reign in regard to this, one of the most common and destructive of all the diseases to which flesh is heir, it is advancing by leaps and bounds.

MORTALITY PER MILLION OF THE POPULATION.

	1837.	1847.	1857.	1867.	1877.	1887.	1897.
Pneumonia	832	1,304	1,230	995	959	1,113	1,122

In direct antagonism to all this scientific bombardment of the poor body, both externally and internally, suggested by the Queen's physician, and which yields such disastrous results, the skilful homœopath, who gets his patient equally early into his hands, while recognising the gravity of the case from the very outset, neither alarms the patient or his friends, nor feels alarm himself, as to the turn things will take (ordinarily for him) when two or three days have passed. He addresses himself at once to the abatement of the fever and the reduction of the temperature, and is usually rewarded at the end of twelve hours by finding that his *aconite* has done its duty well, and on the day following the temperature and pulse have fallen so far, that he can assure the family and friends that a favourable recovery may soon be anticipated. Indeed, in the ordinary run of cases some eight or ten eight-ounce bottles would contain all the medicines the patient will require. This must sound very strangely in allopathic ears; but all homœopaths are

familiar with it. Indeed, out of many such cases, of old, middle-aged, and young, I had never once to furnish a death certificate.

MORTALITY IN PNEUMONIA UNDER ALLOPATHIC AND HOMŒOPATHIC TREATMENT.

Opportunities for comparing the mortality under allopathic and homœopathic treatment do not sufficiently occur in this country as they do on the Continent and in the United States and our own colonies, where hospitals pursuing the several treatments stand side by side. This was distinctly and unexpectedly elicited some years ago when the well-known veteran homœopath, Dr. Routh, of London, published a reply to a pamphlet entitled the "Fallacies of Homœopathy," in which the author tried to discount the inevitable lesson of the astounding disparity in the mortality of the allopathic and homœopathic hospitals at Vienna by boldly affirming that in the Homœopathic hospital "the severe cases were few and far between." It so happened that an independent witness, Sir William Wilde, an eminent Dublin oculist, being there at the time, visited the hospital and saw the cases, and he subsequently testifies, in his work on Austria: "I am bound to say that the cases I saw treated in the Vienna Homœopathic Hospital were fully as acute and virulent as those that have come under my observation elsewhere." Those statistics of Dr. Routh revealed the following startling contrasts in respect to pneumonia and three other dangerous diseases:—

Name of Disease.	Homœopathic Treatment. Deaths per cent.	Allopathic Treatment. Deaths per cent.
Pneumonia	5·7	24
Pleurisy	3	13
Peritonitis	4	13
Dysentery	3	22

How intensely I wish that a dozen homœopathic physicians could be sent out while I write this to South Africa! Hundreds of precious lives would be saved! Were such to volunteer their services, the reply that would reach them would most likely be, "We cannot—we dare not!"

Then the superiority of homœopathy in the treatment of *cholera* is almost so well known as not to need reiteration. Here are some of the figures relative to an epidemic of cholera in Vienna:—

	Cases.	Deaths.	Per cent.
Under Allopathy	331	140	42
,, Homœopathy	278	29	10

At Tischnowitz, in Moravia, Dr. Quin, the introducer of homœopathy into Great Britain, witnessed the effect of homœopathy in an epidemic of cholera, and himself treated twenty-nine cases with only three deaths.

Of the Vienna epidemic of cholera in 1836 Sir William Wilde acknowledges, in his work on Austria (p. 275): "Upon comparing the report of the treatment of cholera in this hospital with that of the same disease in the other hospitals in Vienna during the same period, it appeared that while *two-thirds* of the cases treated by Dr. Fleischmann (the *homœopath*) recovered, *two-thirds* of those treated by the ordinary methods in other hospitals (*allopathic*) died." The superiority of the homœopathic treatment was so evident on this occasion that it led to the repeal by the Austrian Government of the ordinances prohibiting the practice of homœopathy in Austria, which had previously disgraced its statute books.

The figures of the London epidemic of 1854 give the mortality of the "Homœopathic" Hospital as 10·4 per cent. against 51·8 per cent. in the *allopathic* hospitals; and the then Government Inspector, Dr. Macloughlin, frankly wrote to Mr. Cameron, one of the physicians of the Homœopathic Hospital (now in Great Ormond Street, and one of the best equipped and staffed

hospitals in London): "All I saw in your hospital were true cases of cholera in the various stages of the disease, and I saw several cases which did well under your treatment, which I have no hesitation in saying would have sunk under any other." He further added, that "though an allopath, if he were unfortunate enough to be attacked by cholera, he would have himself taken at once to the Homœopathic Hospital for treatment."

INSANITY

is another of those intensely sad diseases whose mortality is rapidly increasing, despite the wondrous alleged discoveries of modern medicine.

MORTALITY PER MILLION.

	1857.	1867.	1877.	1887.	1897.
Insanity	27	30	61	89	119

In this country it is not possible to obtain statistics of the relative treatment of this disease by allopathy and homœopathy; but in the United States, where the two systems have their respective asylums, such statistics are annually furnished, and I am able to present the statistics of five State asylums during past years, four of them being allopathic and one homœopathic.

The eleventh Annual Report of the Westborough (Mass.) Hospital for the Insane clearly shows the advantage of having such hospitals under homœopathic management. *The Boston Herald* of April 20th contains a comparison of the reports of the five hospitals for the insane, from which we take the following, premising that the *Westborough* is under *homœopathic* and the *other four* under *allopathic* management.

1. Recent or Acute Cases.			
State Hospitals.	Admitted.	Recovered.	Per cent.
Worcester	272	75	27·59
Taunton	176	66	37·50
Northampton	109	32	29·36
Danvers	210	53	25·48
Westborough	112	48	42·86
Total	879	274	31·24
2. Chronic Cases.			
Worcester	221	9	4·07
Taunton	124	6	4·84
Northampton	79	4	5·19
Danvers	130	6	4·62
Westborough	107	14	13·08
Total	661	39	5·90

These figures should serve as an impressive warning to the friends and relatives of persons suffering from mental derangement not to delay placing them for *early* treatment in the hands of competent homœopathic physicians.

One curious feature in connection with this splendid record is that it excited the hostility of the allopaths, and instead of going to the Westborough people to learn how to cure the unfortunate insane, they made an ugly attack on the hospital.

Another sad disease, to which is ordinarily attached a very serious mortality (as the outbreaks at Maidstone and Belfast too painfully testify), is that of

TYPHOID FEVER.

We can institute a comparison here also by the help of a colonial paper, *The Melbourne Herald* of April 29th, 1889, which published after an outbreak of the disease in that city the results of treatment in their general hospitals as follows :—

	Beds.	Cases.	Deaths.	Per cent.
Melbourne Hospital ...	318	431	78	18·1
Alfred Hospital	144	324	50	15·4
Homœopathic Hospital	60	305	22	7·2

Observe that the *Homœopathic* Hospital with but sixty beds was able to treat nearly as many cases as the *Alfred* with one hundred and forty-four beds; the reason being that the patients were *cured* and sent home *convalescent* in a much shorter time.

On two or three occasions this serious malady visited Bristol, and carried off a large number of its inhabitants as victims. Not once but several times in different years it invaded the Orphan Houses at Ashley Down, which had been established and maintained by the late Mr. George Müller, and then, as now,

House.	Disease.	Date.	Cases.	Ages.	Deaths.
No. 2	Typhoid	Aug. and Sept., 1881	105	3–17	0
No. 2	Scarlet Fever	Feb., 1882	47	Do.	0
No. 1, No. 2, No. 5	Typhoid	April till Aug., 1884	105, 160, 104	Do.	5
No. 4	Scarlet Fever	Mar. till May, 1886	137	Do.	3
Nos. 1, 2, 4, 5	Measles	1886	152	3–12	0
No. 5	Influenza	1890	109	All ages, and complicated with *Pleurisy*, *Bronchitis*, *Pneumonia*, and *Pleuro-Pneumonia*, and *Meningitis*.	0
All Houses	Influenza. (From 1890 we have not been free from la grippe.)	1893 till 1898	146	3–17	0
			(1,065 cases—8 deaths! One death in every 133 cases!)		

the whole of that institution was under homœopathic treatment. This institution, containing between four thousand and five thousand children, can therefore furnish about the best comparative results of treatment as between allopathy and homœopathy to be found in the United Kingdom.

Desirous of taking advantage of this, I wrote recently to the assistant medical superintendent at Ashley Down, Bristol, and have received the statistics on p. 112 with reference to outbreaks of several diseases, for the most part seriously fatal; and let it be remembered that these cases have occurred amongst children who have had an inheritance of disease and feebleness transmitted to them, as, in the case of the greater number, both their parents were dead prior to their admission.

NOW WHAT SHALL WE SAY TO THESE STATISTICS?

Either these statistics are true or they are false! If true, and this may speedily be verified, they contain the most terrible condemnation of the guiltiness of those who are entrusted with the sicknesses of their fellow-creatures (and profess to be deeply anxious to discover new remedies of any sort, from heaven, earth, or sea, that will help them successfully to fight the battle of disease, and save precious lives), and yet *refuse to investigate* the claims of homœopathy or electro-homœopathy, which yield such results, characterising both alike as charlatanism and quackery.

Occasionally, by accident or otherwise, some earnest worker, depressed by a continuous succession of failures and desiring a more excellent way of dealing with disease, strikes out into independent paths, and experiments for himself with remedies, hitherto unused and unrecognised by the faculty in such circumstances, and finds, to his great surprise and delight, that disease, heretofore invincible in its fatality, yields like magic to the

action of a remedy in which he had no pole-star of past experience in his own firmament to guide him. Such a distinguished and successful practitioner is Dr. Coutts, Physician to the East London Hospital for Children. He has been recently led to employ *belladonna* in the treatment of "broncho-pneumonia," and records a most remarkable decrease in the death-rate since doing so; and if he will only study carefully some dozen more similarly valuable drugs, he will soon become a burning and a shining light in the British firmament. He gives an account of his experiments and experience in *The British Medical Journal* of January 28th, 1899, which reads more like the records of the homœopathic treatment at Müller's Orphan Homes, or at the Homœopathic Hospital, Great Ormond Street, than anything else; so that those who value their children's lives will surely, after this, see to it (whatever their friends or the profession in general may say) that their children, if assailed with any of the diseases enumerated above, including "broncho-pneumonia," shall have a chance, either through Dr. Coutts or some good homœopathic physician, of arriving at maturity as much as Müller's orphans at Bristol or the poor waifs of the East End of London. I must permit this most recent and successful discoverer in the *art of healing* to tell his own story, as follows:—

"I will preface what I have to say by stating that I hold to the prevalent belief that there is an essential difference between croupous-pneumonia and broncho-pneumonia in children. As furnishing one criterion between them, I might appeal to the totally different mortalities in the two forms of the complaint. At the Shadwell Children's Hospital, even with weakly East End children, a mortality of *ten per cent.* would be above the mark in cases of *croupous-pneumonia.* In contrast with this, in cases of *broncho-pneumonia* the mortality has generally, in children under the age of two years, at least ranged from *sixty to eighty* per cent. In spite of the most active treatment, coupled with the most devoted attention of the nursing and resident medical

staff, our mortality in broncho-pneumonia remained appallingly high. Any remedy, therefore, that would serve to diminish this mortality deserves consideration. Such a remedy we think we have found at Shadwell in somewhat large doses of belladonna. Since using belladonna in full doses a large proportion of such cases have recovered. For the knowledge of this property of belladonna overcoming paralysis of the diaphragm I am indebted to several members of the staff of the Great Ormond Street (Children's) Hospital. From no one, however, could I gain any satisfactory explanation as to how the drug acted." (Had he but stepped in next door to the Homœopathic Hospital he could soon have learned not only the *modus operandi* in this case, but a more excellent way still of dealing with this serious disease). He proceeds: "Whilst accepting the fact of the beneficial action of belladonna in the palsy of the diaphragm, I was compelled to leave any explanation of its mode of action to the unsatisfactory region of the empirical. About a year ago Dr. Sydney Ringer [who is nine-tenths a homœopath] pointed out the marked effect of atropine or belladonna in diminishing secretion into the bronchial tubes and pulmonary tissues; and so I determined to give belladonna a trial in the treatment of broncho-pneumonia in children. So far, it has more than answered all that I could have hoped for. With it, as the sole drug administered [true homœopathy—a single drug!], there has been in my cases no need for *steam tents*, *oxygen inhalations* [what a pity that Kipling's physicians, and the physicians of thousands more of our distinguished sires and sons, had not known this easy and more excellent way!] *unlimited stimulations*, *dry cuppings*, and *all the rest* of the former *varied* and *trying* treatments." Then as to the results: "Out of *several dozen cases* thus treated, Dr. Shardlow, our resident medical officer, tells me that he can only recollect a *couple* of deaths. Case after case of the complaint in young infants, in the majority of whom, with the former treatment, one would have anticipated a fatal

termination, has, seemingly owing to belladonna, made a rapid and complete recovery."

Having further stated that all his colleagues—the resident medical staff and the nurses—had come to regard the drug as almost a specific in the disease, he recounts two cases in private practice since, in which he was called in, "the doctors already in attendance having given a practically hopeless prognosis. Both," he tells us, "were cases of severe broncho-pneumonia, following measles, a complication admittedly grave. In the light of my early experience I would have inclined to agree with the prognosis already given. My more recent experience enabled me to modify the prognosis, and both infants did me credit, making a rapid and thorough recovery under that drug." He then proceeds very modestly to confess (not knowing the bed-rock on which he had planted his feet): "In the remarkable small death-rate in my cases at present I cannot but feel that I have been largely favoured by *chance* [! ?]. It is not only with regard to the *mortality* that my experience with belladonna is such a remarkable one. *A very few doses* in most cases relieved the dyspnœa. In a large number of cases—the majority—the temperature fell to normal very soon after the commencement of the treatment. Cases, too, that with former methods might have been expected to run a course of several weeks' duration, have, with the belladonna treatment, lasted only a corresponding number of days." And, infinitely better, has been a sevenfold gain to the patient's recovery and future career.

To my mind this is the most extraordinary paper presented to the readers of *The British Medical Journal* that this century has furnished them by one of their own number; and if they make a right use of it, it may lead to an early revolution in their practice, and a speedy diminution in the "Tables of Mortality." He promises further statistics, later on in the year, of a *comparative* treatment by his colleague and himself *with* and *without* belladonna, for which we are now looking with

much interest; though we deprecate the idea, even for the sake of science, of reverting in a single instance to the old and fatal treatment (unless he has children of his own to experiment upon), when not only the statistics of the past sufficiently instruct as to the future, but God has graciously revealed to him and his colleague a more excellent way. If these earnest enquirers after the truth would only study the works of the immortal Hahnemann, the result of years of indefatigable study and of deep scientific investigation, and the "Pharmacodynamics" and "Therapeutics" of Dr. Richard Hughes, of Brighton (volumes worth their weight in gold to any medical man who wants to *cure* disease), as well as the "Therapeutics" of their own Dr. Sydney Ringer, and besides regularly read the pages of *The Monthly Homœopathic Review*, they will soon discover that there are scores of intractable diseases, besides "broncho-pneumonia," that will yield similar gratifying results to similar treatment. Singularly enough, Dr. Coutts attributes his success to his having used "larger quantities of the drug than had ever been used before." Now, if he will only study the matter more fully, he will find that greatly less of the drug will suffice! He will also find that "the *delirium*, the *flushing of the skin*, the *scarlet rash*" which set in, resulted entirely from the strong doses of belladonna indiscriminately administered, for he tells us that he "gave as much to an infant a few weeks old as to a child of six or seven years." Moreover, "the irritation of the skin, and the restlessness of the children," of which the nurses naturally complained, and which he himself acknowledges to be "disadvantages," will all disappear when he adapts the dose of the medicine to the age and the symptoms of the child. In such future experiments he might find still more suitable remedies for broncho-pneumonia in aconite, the tartrate of antimony, and a solution of phosphorus. But I need hardly say that these will require to be administered in minute, even *infinitesimal* doses; whilst he will find in weak doses of belladonna (alternated with aconite) a specific for scarlet fever, and

an invaluable means of dealing effectually with very many diseased conditions of the larynx and pharynx.

THE PLAIN INFERENCE

from the contrasted statistics of allopathic and homœopathic practice that have been presented is this: that the only real progress made in the practice of medicine during the Queen's reign is due to the deliberately studied development of pharmacology, or accidental employment of drugs, in accordance with the universal and unerring teaching of the immortal Hahnemann—*viz.* that a drug which, administered in a substantial quantity, induces in a healthy person a wide train of varying and serious symptoms, will, when administered in a minute, and even an infinitesimal dose, speedily antagonise and remove a similarly wide and alarming series of symptoms, presenting themselves in the course of an acute or chronic disease; and further, that in the selection of the *single curative remedy*, a preference must be given to that one which embodies in its action the larger number and more pronounced symptoms of the disease to be conquered.

If it be asked, How is it, then, that there are so few qualified practitioners in England and Wales, Scotland and Ireland, ostensibly practising homœopathy—but some three hundred, as compared with the thirty-five thousand odd who practise allopathy? my reply is:—

1. *Numbers* never can demonstrate the truth or the error, the value or the worthlessness of any practice, but only *results.* In all ages of the world's history, from our Lord's day down to the present, *reformers* have ofttimes in the outset had to stand alone, and bear the brunt of the *fiercest opposition.*

2. The old school feel quite content with the steady old stage-coach system of travelling from sickness to health. They do not want either steam or electric motive power; they do not want new, quick-firing Maxims—the old artillery suffices; and with their combined influence, their concentrated and

systematic opposition throughout the land is so great that they can, by their united sophistry and sarcasm and social influence, stifle awakening enquiry, and even crush the incipient efforts of youthful aspiration after freedom of action in the use of drugs, so that those who would investigate this matter for themselves, either in the position of physicians or patients, dare not, without endangering their social status and their sustenance in the one case, or their obtaining anything like cordial attention in the other. It should be mentioned further here, in support of our contention that homœopathy should hold a *front place* amongst us, that in the United States of America, where the people and their physicians enjoy and exercise a measure of intelligent freedom from professional control which we do not, and are never averse to consider on its merits any new thing, it is a singular fact that the practitioners of homœopathy, if they do not actually outnumber, are, at all events, as numerous as those of the old faith, which, on their own admission, "has not made any real progress since the days of ancient times."

During recent years there has been a great awakening of medical enthusiasm in connection with the study of the actions of various "toxins," as they are termed (literally "poisons"), of which homœopaths hitherto have been the sole users, but after a different fashion. Pasteur, of Paris, led the van, Koch, of Berlin, followed soon after; and we all remember the rush that was made a few years ago to Berlin from England, and the United States, and from the antipodes also, till some three thousand learned physicians had gathered together to sit at this great man's feet and learn how to treat the terrible disease of "tuberculosis" by what might be termed, in Shakespeare's words, but with a different meaning, "a bare bodkin" (a hypodermic syringe!). One could almost wish to draw the mantle of oblivion over that page of medical history. It has pretty well all fizzled out, and now we are assured that medicine is of no use whatever in clipping the wings of this destroying angel, that we must get the patients out into the

fresh air of heaven, and hope that through this means, alone or mainly, the terrible scourge of Britain will be stayed, and those who otherwise might look for nothing but an early grave, may live a hundred years.

This fresh departure on the part of many of the younger scientists of the present day contemplates not so much (if at all, though it may lead to it) the *curing* of diseases *similar* to those these *toxins* would produce, which was Hahnemann's line of investigation a hundred years ago, and is fully expounded and illustrated in his voluminous and priceless works, but rather to render persons *immune* or incapable of being assailed by the disease against which they are presumed to be fortified. I heartily rejoice at these investigations, for I firmly believe that they will in time, through the trend of the truth that is in them, revolutionise the whole of old-time practice, and introduce a new and brighter era for the world.

While I contend earnestly for the universal adoption of the Hahnemannic law of treating disease on the part of the profession and of the community at large, I am compelled to claim on behalf of the remedies that Count Mattei has introduced, secret though they be, that they can do more and better in the treatment of several serious diseases than the ordinary homœopathic preparations—such diseases, *e.g.*, as cancer, calculus, cataract, Bright's disease, diabetes, epilepsy, almost all forms of tumours, and many of the diseases of the nervous and circulatory systems. I have discovered in their use, and gladly own that it is in virtue of their being strictly *homœopathic* in their preparation and action that they achieve such wonderful results. The title "electro-homœopathic" given by the Count to his remedies I attach no importance to whatever, being intended, I am satisfied, simply to describe the marvellously rapid action of the drugs, since this same effect is so commonly associated with the homœopathic preparations when the right remedy has been selected; and so I would appeal earnestly to all homœopathic practitioners throughout the world (and likewise to all allopaths)

who desire to occupy the second rank of humanity (the front rank being universally accorded to the ambassadors of the risen Christ), as the healers of the bodily diseases of mankind, to annex these remedies without delay, to prove their powers, which they can soon and easily do, and, being convinced, as they soon will, of their extraordinary efficacy, avail themselves of and extend the advantages they present to our suffering race, putting aside altogether, as utterly irrelevant and childish, such preliminary enquiries as: Whence have they come? what are their constituent elements? do the magnates of the profession approve them? but rather ask: What *have* they accomplished? what *can* they do? and thus manifest that they are actuated by a sincere desire to help the human race to live as far as possible a healthy and long life, and to die at last a peaceful and painless death, "falling asleep" after "having served their generation [let us hope] according to the will of God."

There has recently issued from the press a very interesting and seasonable book,

Wallace's "Wonderful Century,"

in which, referring to the marvellous changes introduced by the numerous improvements in the homes and habits of the community since the century began, he affirms that "the making of wider, cleaner, and less obstructed streets; the construction of an entirely new system of drainage; the improved supply of pure water; the use of potatoes and other vegetables in the daily dietary; the use of tea, with its accompanying milk and sugar; and the spreading out of the population on a wider area, have secured simultaneously and effectually the most extraordinary changes in the mortality of the half-century from 1775–1825;" combining sufficiently to account for the most remarkable decrease of mortality, not pre-eminently nor alone in small-pox, of which he makes especial mention, but in all the more important diseases which especially characterised

that period. "This," he continued, "is strikingly shown by Dr. Farr's vital statistics published in his third report, p. 98, as follows, contrasting two of these decades":—

Name of Disease.	Mortality per Million.	
	1771-1780.	1801-1810.
Fourteen Infantile Diseases ...	1,682	789
Small-pox	502	204
Fevers	621	264
Consumption	1,121	716
Dropsy	225	113

Thus from 1775–1805 a change occurred which reduced the mortality from all the chief diseases to one-half or less than half their previous amount, but as it was a decrease antecedent to the introduction of vaccination (in which he does not believe), he argues that that operation cannot have been the cause of such greatly decreased mortality.

Those who believe in vaccination, as all sound homœopaths do, regard its introduction into general use after this period as the fruitful factor of the still further and astonishing decrease in the mortality from small-pox during the present century, till now it is almost extinguished throughout the land. "In no similar period," he contends, "between 1629, when the 'Bills of Mortality' (as they were then designated) were first introduced, down till the present time has there been anything comparable to this decrease of mortality."

All this strongly illustrates and substantiates my own contention, that the continued decline in these kindred diseases during the Queen's reign has been due mainly to the causes before mentioned by Mr. Wallace, and not to any improved methods of dealing with seriously desolating diseases, which, despite all the boasted advancement and acquisitions of the orthodox profession during this period, continue not only unaffected thereby, but appear to be growing more fatal from year to year.

HOW I BECAME A MEDICAL MAN.

FROM my earliest days my tastes and inclinations turned towards the medical profession as ordinarily practised. Brought up in the immediate vicinity of an open surgery, to which, in those days, every case of accident was usually carried, I was a constant privileged observer of all the minor operations of surgery, and, as years passed, was many a time honoured to hold a candle, pound a mortar, and, as my education advanced, make a pill. I knew nothing else than old-time treatment from my youth up; and while studying for the ministry, for which originally my thoughts were turned by my parents, and round which all the associations of my early days were gathered, I carried forward, I may say simultaneously, my study of medicine and of theology, and availed myself of every opportunity of acquiring more accurate and scientific knowledge. While attending divinity classes at the Free Church College, Edinburgh, I also attended a number of medical classes (extern to the University), which were conducted by highly qualified private practitioners, and thus grew more and more enamoured with the healing art. I grew up an allopath.

Like most others who have never known ought else than allopathic treatment, I firmly believed in its transcendent value, and pinned my faith to its stereotyped practice, fully believing that the regular medical practitioners were the saviours of society and the only source of healing and health. At this time I could do little else than advise the ailing to summon their physicians and adhere strictly to their dictates. I was destined, however, ere long to learn and practise a more excellent way. I shall here narrate as simply as I can—

the child on her knees all the previous day, so that even this improvement, if it were not all we could desire, was a great relief to the distress of the previous condition.

I then put two more globules in half a wine-glass of water, and gave directions for their use, as I had been instructed, and commending them to the sympathy and the succour of the all-loving Heavenly Father, left them, promising to return early next day. I did so, and found, to my great surprise and delight, that the child had slept soundly for several hours, and had since waking been nursed once and again by his mother, who was full of a joy that was unspeakable, but easily shared. The same medicine was administered at stated intervals during the following days, and apparently all was going well till a few days later, when the mother called my attention to the swollen condition of his abdomen, the peculiar character of the stool, and the ulcerated state of the tongue and the gums. I felt now that this latter state was worse than the first, and hurried home to consult my new counsellor once more concerning this state of things. She put her domestic guide into my hands, and I soon discovered that the child was suffering from a fresh and very serious disease, due to the specific action of the *mercury* which the child had been taking from the doctor, and could only be successfully combated by the use of an antidotal remedy, named *hepar sulphuris.* The little box contained *hepar sulphuris* 12 (12th dilution). I hurried off and directed that one globule should be placed on the child's tongue every four hours. (O ye anxious mothers, how easy to administer medicine like this!) The following day there was a decided abatement in the various symptoms, and day by day the progress was maintained till, at the end of two or three weeks, the child was to all intents and purposes in perfect health. That child is now a man of more than forty years, with children of his own, and at times when I have returned to Stewarton to visit old friends, of whom now very few are left, he was sure (though living some miles away) to put in an

appearance, and give me a hearty reception in his own old home.

I need not add that this one case did more than a hundred volumes would have done to make me a homœopath.

A Second Case.

A few days later I was requested to visit another household, close by this last one, where the daughter, some sixteen years of age, was ill and nigh unto death. I soon learned that she had been seized with typhus fever some ten or twelve days previous, and was now gradually sinking into her last sleep. Her eyes were closed, her teeth clenched, and the gums, teeth, and lips covered with black *sordes*, and she looked to all intents and purposes moribund. I was asked by the anxious, weeping mother if I could do anything for her daughter, as the doctor had given up all hope and treatment. I returned to my home, and with my new preceptor studied the case as described in our domestic guide. I found that *arsenicum* was the appropriate remedy for the existing extreme condition. I hurried back, and, as directed, succeeded in opening the lips and teeth and placing four or five globules on the tongue; and putting six or eight more in a wine-glass of water, directed the mother to continue to do what she had been already doing—*viz.* moistening her lips with a feather dipped in water, only now she was to use this medicated water instead, and departed. I was going out then into the country for a day's visitation, and on returning in the evening about ten at night, I stepped into the house once more with mingled feelings, my fears exceeding my hopes, when, to my surprise, I found again what seemed like a resurrection from death to life. The eyes re-opened! the *sordes* disappeared! and I learned that more than once she had spoken to her mother and partaken of morsels of food! She continued the same medicines steadily for a week, renewed from time to time, and rapidly regained both health and strength.

At this lapse of time I cannot say whether she is still alive, but I know that she lived several years after.

A Third Case

followed close upon the heels of the last. A woman of middle age had been suffering for some weeks from a bad whitlow in the middle finger of her right hand. It had been fairly and fully treated on orthodox lines, laid open up the centre of the finger down to the bone, and being poulticed. This but made matters all the worse; and when I was invited and in a measure constrained to pay her a visit (for I began to feel and fear that I might get into trouble by assuming responsibility in a case of so serious a nature, and to all intents hopeless), I went, and found her in a very alarming condition, her hand and finger greatly swollen, her arm also much swollen, and dark with discolouration, and every arrangement made for taking her into the Glasgow Infirmary the following day that her arm might be amputated at the shoulder. Satisfied that none of the tiny globules I might dissolve for her could possibly prejudice her condition, I administered to her first of all, hourly, in alternation, a solution of belladonna and *mercurius solubilis*—a form of mercury prepared by Hahnemann himself—as an internal medicine, with poultices of linseed meal and tincture of calendula, ordering it to be frequently fomented with this same tincture in warm water. This treatment began early in the day, and the next day she was to be taken into the hospital. Before the evening came the throbbing pain had fully ceased, the discolouration began to disappear, and the finger was visibly reduced in size. It was unanimously resolved that, if even the same improvement continued, she should not go to Glasgow next day. She was still better the following morning, and made steady progress from that day forward. Medicines had to be altered. *Mercurius* gave way to *hepar sulphuris*, and *hepar sulphuris* to *silica*; but after two or three

weeks the bone was exfoliated, removed, and the finger healed up, and her arm was saved, and probably her life.

Need I add that this case also did much to make me a homœopath, and confirm my faith in the stereotyped formula, "*Similia similibus curentur*"?

That which convinced me then of the immeasurable superiority of the treatment of disease by the use of medicines administered homœopathically has continued through these forty years since to maintain my faith without wavering.

Not long after these events I was invited by the Free Church Evangelisation Committee to spend my summer holidays in visiting a number of fishing-villages on the east coast of Scotland. Here I had many fresh opportunities of walking in the footsteps of the great Physician of Nazareth, Who, when He sent forth His disciples at the first, bade them do what all His ambassadors should do still, and as He intended that they should when He sent them forth—*viz.* "heal the sick, preach the word"; and well I learned here what I have often pointed out since, that the Churches of Christ and the missionary institutions of the land have long divested themselves of more than half their power for good by relinquishing the office of *healing the sick*, and relegating it to a body of men who, for the most part, regard their profession as entirely secular, and would not, on any account, think of combining the healing of the soul with the healing of the body; indeed, who not unfrequently discountenance the visits of the minister, lest the patient should write bitter things against himself, and so endanger his recovery.

One striking incident, illustrating the mighty power possessed by the healer who is also a preacher of the Gospel of Peace, occurred in the early days of my sojourn in these parts, for my first visit to Aberdeenshire led to my removing shortly after into the neighbourhood of my previous labours, and I became the minister of the Free Church, Cruden. A dear ministerial friend came from Ayrshire in the following year on a similar mission to the fishing-villages, and resided with me during

the time at the Manse, whilst I gave myself up as fully as I could to join him in his happy holiday work.

One day we visited a village in which the people were, proverbially, non-churchgoing in their habits; and not only so, but inimical to any attempt to break in upon their indifference. Though invited to join in a service which we intended to hold in the village, and to which many of the farm population around had come, not one of the villagers put in an appearance, though it was said that several doors were opened slightly after the address was begun. One of the women, more bitter than her neighbours, shortly after we had gone, stood forth in the midst of a considerable group and said she was "only sorry that a strong wind had not sprung up and swept the whole lot of them over the cliff," which, there, was some one hundred and fifty feet above the sea. This we learned later on, not only from her neighbours, but also from herself. But to the incident.

The following morning my friend and myself had just finished breakfast, when a letter was handed to me from a worthy elder of the Church (still alive), who lived not far distant from the village, informing me that shortly after we had left the previous evening, a young fisher-lad of seventeen, who had been descending the cliff (being let down by a rope) for the purpose of gathering sea-fowls' eggs, had lost his footing, broken the rope, and fallen to the foot of the cliff, whence he had been carried home to his mother (for I believe his father was dead). He added, further, that the doctor had been up late with him at night, and had returned again early that morning, and finding no improvement, left no ray of hope behind him. He (the elder) suggested that a visit from us might be opportune and useful. Accordingly we set out, and drove over to the scene of our previous evening's unsuccessful visit, as we regarded it. We went straight to the house where this lad lay unconscious and dying. We learned that he was suffering from "concussion of the brain." Anticipating this, I had provided myself with a remedy that was the most suitable in such a case—*viz.* the

tincture of *arnica*—which I prepared in the shape of a weak lotion, with which cloths were to be moistened and kept continually applied to his head, and the same tincture, in a weaker form, a few drops in a little water, which the mother was to administer in small quantities as frequently as she could; and, my friend having commended them to the merciful care of the great Physician, we left them, sad at heart, but grateful to God for the opening He had created.

Returning in the evening from another village two or three miles distant, we looked in again, and found the lad looking around him, and his mother beaming with joy. Strange to say, this was the very woman who had uttered her wicked wish concerning us the night before. She could not but feel deeply mortified and ashamed, and acknowledged this very soon after. Subsequent to this a great change passed over the village, religious services became more frequent and were valued by the people, a goodly number of whom became regular attendants and members of the Churches around.

Thus the ministering to the body of this lad really opened a wide door to the ministering to the souls of the people.

EPILEPSY.

Whilst residing in Aberdeenshire I was one day visited by a rural letter carrier, about fifty years of age, who was subject to frequent attacks of epilepsy. He had an extensive round of country to travel day by day, and rarely a week passed without his having a serious seizure in some of the farmsteads and even on the highways and byways.

Usually punctual, if he did not appear at his usual time, those expecting letters would say, "Poor Jock must have had a fit somewhere to-day." He was brought to see me, and placed under treatment, with the result that very shortly his attacks were fewer and slighter, and finally disappeared altogether. Years after I heard of him as being still in health, and free from his old disease.

I was also visited by a man, advanced in years, from some ten miles distant. He was suffering from almost total blindness in both eyes, and had been under local treatment for some considerable time without any advantage. Taking him into a darkened room, and holding a lighted candle before him, I asked him to put his hand upon it. He extended his hand in a direction far removed from the candle, and said he saw something there, but not like a light. Having consulted my books on the subject, for I had now several, I gathered that *phosphorus* would most probably be the means of improving his condition, if not of curing him altogether. This I gave him in a high dilution. He returned in about a fortnight, and when preparing to test him again by the lighted candle in a darkened chamber, he exclaimed, "I can put my hand on the candle noo!" This medicine having done so much for him, I repeated it, and bade him return in another fortnight, which he did, greatly improved in general health. Questioning him about his present experiences, he told me that he could see the candle perfectly, wherever placed; but the only drawback was that it appeared to be surrounded with a gauze veil. Looking straight at me where I stood, he said, "I see the same sort of veil covering you."

Again I consulted my Jahr's "Repertory of Symptoms" (a marvellous book such as allopaths have never known), and found that *phosphorus* was still the medicine indicated. Accordingly I gave him a fresh supply. He never returned, and I only learned a few months later, from another patient from his neighbourhood who came about his eyes, that this man was now perfectly well.

One Other Case

I must narrate in this connection. I had not long been settled in Cruden before an outbreak of diphtheria filled some homes with bitter mourning. One house in particular, some miles away in another parish, was left absolutely childless,

seven (or eight) children having been cut down and carried away, as with a flood. In the home of one of my elders, and ever since a life-long friend, the angel of death had also entered and cut down two members of the family, the last a lad of some fourteen years. I had visited him on the Friday, and commended him and his parents to the loving sympathy of the Heavenly Father, and returned home to the Manse, some three miles distant; and little more than an hour passed before a messenger brought a letter to tell me that shortly after I had left he had passed away. The day following we committed his body to the grave.

The next day was the Sabbath, and by appointment I proceeded after my morning service to a parish some thirteen miles distant, to take the evening service after the Communion. Being moonlight, I rode home again, arriving late; when, on reaching the Manse door, expecting my day's work was done, a letter was put into my hand from my bereaved elder and friend, informing me that one of his daughters, then some eight or nine years old, had been taken suddenly ill through the Saturday night, had during the day fallen into a deep sleep, out of which neither of the two doctors could awake her; and asking me, if I possibly could, to come down and see if I could do something for them. I had not interfered in any of the previous cases; but I felt at once if I could save this life I should not stand upon etiquette, but go and do my best. I consulted my "Repertory" and found, even as the fundamental law of homœopathy would itself have taught me, that *opium* was questionably the only remedy that could help me in such a case as this. I took with me, having freshly prepared it, a *second decimal* dilution of the drug, intending to administer it by olfaction. I mounted my horse again, and was soon in the house, which, late though it was then, was filled with neighbours from far and near who, apparently fearless of infection, had gathered in. On making my way to the side of the bed I found the child in a very weak and exhausted condition, her hair

dishevelled and wet, as, but an hour or more previously, the doctor had lifted her head over the edge of the bed (a box-bed in a corner of the room), and poured two or three jugs of cold water over it. She was breathing stertorously, and obviously very exhausted and weak. With considerable timidity and misgiving—for I had never before attempted to influence disease by *olfaction*—I removed the cork from a two-drachm bottle (two teaspoonfuls), and brought the mouth of the bottle into contact with her nostrils. In a very few seconds she moved her head quickly, as if to escape from some annoyance. This was the first voluntary or involuntary movement she had made since morning; and I can well recall the glad excitement of father and mother, both of whom I visited, when in Aberdeen, but a few weeks ago. I followed up my application, however, and very soon she turned right round in the bed, so as to get away from the disturbing element. I pursued her again with the bottle, and the next moment she sat right up in the bed and stared around her. I now spoke to her. She had been a favourite of mine, and I now bade her rise and come over to the fireside to have a chat with me before going home. I then took the opportunity of examining her throat and of leaving medicine for the disease which was manifestly at work, and in the midst of the family and the neighbours who were crowding round the door, gave God the praise, and asked that in His loving-kindness he would prolong the life He had virtually restored, and perfect her cure. Our prayer was graciously answered. She soon regained her health; and a few years ago, when travelling through New Zealand, I halted at Omauroo for a couple of days, and had the pleasure of visiting her and her husband in their new-world home, surrounded by seven or eight sons and daughters.*

After some years' residence in this cold and trying climate I had to remove to the south of England on account of my

* I have just learned that the father, full of years and honour, has been committed to his last resting-place at Cruden.

wife's ill-health. Here I spent several years in various parts, engaged in ministerial work, pursuing medical studies, and healing the sick, as opportunity presented. In the last of these spheres, offered to me in the neighbourhood of a medical school by a gentleman, the life of whose eldest son I had been instrumental in saving when he was a child, I was able to take a full medical curriculum, and subsequently received my legal qualification to practise medicine and surgery in any part of the world.

FIRST SPHERE OF PRACTICE.

After considering many inviting spheres of future labour, I settled in Clifton (Bristol), and proceeded at once to lay out my plans of operation, having purchased no practice, and consequently enjoying no advantage of entering upon another man's labours. Though I had a number of friends in Bristol, I could not count on any of these as patients, as they all had their own family physicians, and such an arrangement I never desired or attempted to alter. Accordingly, eager for work, I opened two dispensaries in outlying suburbs, and a consulting-room in the centre of Bristol. I had not long to wait for patients at the dispensaries. They came dropping in one by one, and before long by twos and threes, till I had frequently a dozen waiting their turn. Occasionally, in connection with this work, I was invited to visit patients at their homes, who were unable to come to the dispensary; and by-and-by visitors came to my central consulting-room, and requests came to my residence to pay visits round about me in Redland and Clifton. In many of these latter instances the recommendation came from the outlying suburbs (even through charwomen whose families had benefited by the dispensaries), and at first mainly for *chronic* ailments; but by-and-by I was called in to the most *acute* cases, and succeeded so well by the use of *homœopathic* remedies, that the rapidity with which cures were effected and

the simplicity of the remedies administered brought me so much work that I had at length to confine myself principally to my home work, and to appoint a resident assistant in each of the dispensaries—one of whom is now an accomplished and successful practitioner in a fashionable watering-place, and the other is assistant in the medical department of that noble institution which has long enjoyed the immense advantage of *homœopathic* treatment—I refer to Müller's Orphan Houses.

Full of work as my hands were in Bristol and its suburbs, I was frequently summoned to distant parts. Thus, one afternoon I received a telegram from a lady in Cheshire asking me to come at once and see her mother, who, she feared, was dying. I left in an hour by the express, and reached Chester about ten o'clock. I found the patient almost comatose, sunk down in the bed, and apparently near the end. I said to the daughters, it was very kind of them to invite me to come and see their mother, who had been an old friend; but I feared that it was too late to make any impression upon her condition. The family physician, the most eminent in the old city, who had been recently there, held out no hope of the patient being alive in the morning, and every indication justified the prognosis. I hesitated to prescribe, believing it to be too late to hope for any change; but they besought me to do what I could, and accordingly I prepared some *arsenicum*, a medicine which has ofttimes proved in my hands a polychrest in such extreme conditions, and left immediately to catch the midnight mail, to return home. They were to wire me next morning their mother's condition, and if she was still surviving and the least improvement manifest, I was to go again the following day by the same train. In the forenoon I received a telegram, stating that she had slept soundly through the night, awaked looking intelligently around her, and appeared very much more lifelike than the day before. The doctor, who had returned in the morning, expressed his astonishment at the remarkable change. I returned and prescribed anew. She continued to use the

medicines prescribed for her now and subsequently by correspondence, regained her health and strength, and lived for several years.

It would be impossible for me to describe in a small book like this the one-hundredth part of the cases which came under my care—many of them of long standing, many acute. Cases of diphtheria, scarlet fever, measles, whooping-cough, pneumonia, bronchitis, etc., with an extremely low rate of mortality, such as is the case universally, where homœopathic medicines have been timely administered. One thing I used to rejoice in, that I was very rarely called upon to supply a death certificate, except in the case of the old, who must die.

HOW I BECAME AN ELECTRO-HOMŒOPATH.

Whilst thus busily engaged in an ever-increasing practice, tidings reached me of the wonderful discovery of Count Cæsar Mattei, of Bologna, and of the marvellous results that were being obtained from the use of his remedies, even by a person unqualified. Some of my patients told me that they had tried them with good results; and I resolved at once, being assured of their homœopathicity by the form in which they were prepared and administered, to embrace an early opportunity of putting them to the proof.

Clifton Experiences.

A case soon presented itself, as, alas! these cases are too common. The woman was about forty years of age. She resided at Brixton, but was now upon a visit to her sister in Clifton. She had a large scirrhus in the right breast with axillary complication, and had been urged to have it removed (by the knife, of course). Her sister brought her to me, and she gladly availed herself of the Mattei treatment, then in its infancy; and while she continued at her sister's house, considerable progress was made. Her pain greatly abated, the

swollen glands became smaller, and her general health was greatly improved. On returning home to her household duties she relaxed her diligence in taking the remedies, with the common result that she speedily relapsed into her previous state, and asked me, if I were up in London, that I would go and see her. I had recently heard so much of the successful use of these remedies at St. Saviour's Hospital, Osnaburgh Street, that I longed to visit it. Accordingly I ran up to London to see with my own eyes what my ears had heard. I presented myself at the gate, and requested an interview with the distinguished lady (now, alas! no more) who expended annually her entire large income on its maintenance, supplemented unstintingly by her husband when necessary; and when ushered into Mrs. Palmer's presence I was forcibly struck with the manifest fact that she was a queen amongst women. I have no intention to write a panegyric on this wonderful woman; but I felt drawn to her more and more as she conducted me from one ward to another, and from one private chamber to another, and examined the numerous cases then under various treatments (numerous for a private hospital maintained at her sole expense). My admiration increased greatly, and when I saw the extraordinary progress made in many serious cases of cancer and lupus, and heard from the patients' lips their past history, I felt assured that a grand discovery had been made in the matter of dealing with one of the commonest and saddest diseases of humanity; and when at length she invited me to come up to London and go in heartily for the Mattei treatment, adding that she would throw the hospital open to all comers as out-patients, and would receive as in-patients any special cases that might benefit by being under constant observation, I felt at once fired with (I trust) a laudable ambition to be privileged and honoured to propagate, more widely than I could hope to do at Clifton, a treatment which seemed fitted and destined to arrest or alleviate the heretofore most cruel disease affecting the human race, and I

was not long in making up my mind to accept her offer. Though it cost me a great struggle to leave Clifton for ever where I had now spent many busy and happy years, and made many friends, the die was cast. I disposed of my practice, and in a few months entered upon my final life-work in London. I have now spent fifteen years here, during which I have had several thousand patients pass through my hands with results that should satisfy any practitioner, who desired above all things the health and comfort of his patients. I have used the homœopathic and electro-homœopathic remedies, and obtained excellent results from both; but I must confess that in coping with *cancerous* disease, wherever situated, I have always had the best results from the use of Count Mattei's remedies. Accustomed as I had been now for many years to homœopathically prepared medicines, I fancied that these would meet with universal acceptance, if not by allopaths, yet, at any rate, that all homœopaths would welcome and annex them, and if this should not be so, that all sufferers at least would search them out, and use them. But I soon found that the old school would have none of them, and that the new school also looked askant upon them, because of their secret composition, and that patients were difficult to persuade that medicines so weak in themselves could possibly touch so terrible a disease.

I will append here a few cases, illustrative of the extraordinary action of these medicines in diseases in which ordinary homœopathic medicines have been administered with partial success, but frequently fail, and at no time can yield the splendid results to be obtained from the Count's remedies.

Bright's Disease.

This is one of those persistent and fatal diseases which old-time medicine evidently cannot touch (52 deaths per million in 1857, 265 in 1897—*fivefold*!)

Now homœopathic medicines have, I believe, accomplished some cures of this serious malady; I never enjoyed this success

myself with the remedies of Hahnemann. The Mattei remedies, however, have restored to health each of the patients for whom I prescribed them. One of these patients, subsequent to a severe attack of scarlet fever when about twelve years of age, developed this sad disease, and for five years had been under the care of the two most eminent specialists of that day with occasional but never permanent improvement. Albumen was present in considerable abundance when the patient was brought to me, some eight or nine years ago. It was the first case of *albuminuria* I had treated with the Mattei remedies, and at the end of about ten months the patient had gained a stone in weight, was perfectly freed from the disease, and has continued so ever since.

In two other notable cases, which I cannot particularise fully, both patients had been *objected to* by two doctors,—one a physician, the other a surgeon, men of considerable social and professional standing—and a barrier hereby opposed in one instance to the entering upon what might one day become a brilliant career, and in the other, to being accepted by a first-class office for a heavy life insurance. Both were sent back for medical treatment, and in two months the former, and in six months the latter, were cordially admitted—the latter without any extra premium, the doctors themselves being no little surprised. Two of these patients are, I know, alive to-day, and free from all traces of the disease at the present hour, whilst the third is, I believe, in active service in a foreign land.

Another disease, which really belongs to the domain of the physician, but is commonly relegated to the surgeon's knife, is

Calculus.

This is a most painful and obstinate disease, and rarely, if ever, cured by medical treatment. I have not had many such cases; but in one the patient was far advanced in years, the calculus was a large one, and the sufferings great. An eminent specialist advised and urged immediate operation, though at

the patient's age it would have been extremely risky. He was advised to try the remedies of Count Mattei, and with the consent of his friends began them at once. He persisted, and in the course of twelve months the entire stone was dissolved, and the whole train of concomitant painful symptoms had passed away.

Diphtheria

has been another intractable disease in the hands of the orthodox practitioner. In 1857 there were 82 deaths per million; in 1897, despite the much lauded antitoxin, and its growing acceptance by the profession as a perfect panacea in this disease, the mortality was 246 per million. It is often alleged that statistics may be made to prove almost anything! In connection with this disease there is at times an extraordinary discrepancy in the assertions that are made. I make no apology for inserting a letter which appeared in the columns of *The Daily Chronicle* on June 16th last:—

Antitoxin and Diphtheria.

The Hon. Stephen Coleridge, honorary secretary and treasurer of the National Anti-Vivisection Society, writes under yesterday's date:

"Lord Lister last week is reported in *The Daily Chronicle* to have used the following words in a speech delivered at the Hotel Cecil:

"'The deaths from diphtheria had been reduced to zero by the help of bacteriological study. . . . He hoped that those ignorant persons whose protestations against bacteriological research were the loudest would bear these undeniable facts in mind."

The report adds that Lord Lister supported this statement about diphtheria and zero by statistics from Chicago!

The treatment of diphtheria with antitoxin, which is the treatment Lord Lister is speaking of, as founded upon bac-

teriological study, was brought into public notice in this country in 1894 (see *The British Medical Journal*, June 23rd, 1894), and the following are the deaths from diphtheria per million persons living in the years 1877, 1887, and 1897:

	London.	England.
1877	83 per million.	111 per million.
1887	235 ,, ...	160 ,,
1897	509 ,, ...	246 ,,
	(Antitoxin introduced 1894).	

Most people (Mr. Coleridge thinks) will prefer to take their information from the Registrar-General's returns rather than from Chicago.

The fact is, the old treatment of this disease has utterly failed, and the profession, like drowning men, grasp at the merest straw that goes floating by, and should they yet discover a safe means of utilising this antitoxin (as they term it, and call it a grand discovery), they will find, when they quit the river, that they are unconsciously dressing themselves in their homœopathic brethren's clothes. "*Similia similibus curentur*" ("Let likes be treated by likes"). Homœopaths have wrought wonders in this disease, and I believe it is extremely rare for a homœopathic physician to lose a patient suffering from it. I never did myself, save once, though my youngest patient must have been under four years of age, and the younger the patient the less hope there is of effecting a cure.

A few years back a friend of mine, travelling in Canada, fell in with a homœopathic physician, who enjoyed a high repute in the city in which he carried on his profession. This friend, observing that he had an almost incessant cough, from which he owned he could not free himself, though he had tried every conceivable remedy, said to him, "Come over to London, and my doctor will cure you!" This heavy bill, which was drawn upon me without my knowledge or sanction, was duly presented to me in person a few months later; and after describing his case, I prescribed for him a Mattei remedy, which I had found,

in almost every similar case, magical in its results, and gave him directions how to use it. It was in a liquid form, in which I now prepare almost all the Count's remedies, at once for accuracy of preparation and convenience for use. He went down to Yorkshire for a week to visit old friends of his family; and on returning, entered my room a second time, exclaiming as he approached me, "Well, doctor, I have lost my drops through the cork working out in my pocket—but I must own that prior to that I had lost my cough; and now I want you to give me a larger bottle to send to the purser of the steamer I came across in, who was suffering similarly to myself; and while I am here in London I want to learn all I can about these marvellous remedies." I cheerfully became his instructor, and every leisure hour we could severally spare he plied me with questions, and, pencil in hand, noted down my answers in his capacious pocket-book. Finally, he took a large store of the medicines out with him; and when, a year later, I made a tour of the States, and crossed to Canada, and visited him, he received me most warmly, and showed me no little kindness, and among other things said to me, "Prior to my getting Count Mattei's homœopathic remedies I was fairly successful in dealing with diphtheria by the ordinary homœopathic remedies, but I could not, as a rule, save children under four or five years. I could not maintain their strength; but since I have been able to add that marvellously strengthening remedy, '*antiscrofoloso*,' I never lose a child at all. The medicines being, like all other homœopathic remedies, tasteless, the youngest child readily takes them." This physician's practice was then, and, I have no doubt, is still, a very extensive one.

Time would fail me to recount the wondrous efficacy of these remedies in many other serious diseases to which flesh is heir; and I am sure if they can cure *cancer* in any shape or form (and that they *can do so*, and *have done so*, is *indisputable*), then as the greater includes the less, they can cope effectually with any and every disease.

There remain but two other diseases on which I should like to say a few things in their relation to the remedies of Count Mattei. First of all—

LEPROSY.

This, I need scarcely say, is one of the most ancient and inveterate of all forms of tubercular diseases of the skin, and for which, throughout bygone centuries, remedies have ever and anon been suggested and employed in vain. When we consider how common it is in all Eastern lands and in our own Eastern possessions, we should gladly welcome and make use of any remedy which had been successfully employed in effecting the slightest improvement in the condition of the unhappy victims of this disease. Some nine years ago, after a great flourish of trumpets, a small party of distinguished medical men, selected mainly from the younger members of the profession, who enjoyed a good reputation as to their powers of original research, were sent forth to India, with a liberal balance placed to their credit, that they might investigate this fell disease in its chief habitats and all its forms, and, if possible, not only discover the real nature and origin of the disease, but likewise the best means for its arrest and cure; and though an elaborate report was furnished after their return of many interesting features of the disease, and important suggestions as to the absolute necessity for isolating the infected, yet no remedial treatment was suggested, and the whole subject is virtually relegated to the coming century.

About the very same time that this Commission was being organised and sent out, there appeared in the daily papers a brief but startling intimation that two lepers had been cured of their leprosy by means of Count Mattei's remedies administered by Father Müller, the Chief Director of the Medical Department of St. Joseph's College, Mangalore.

My attention was turned to this extraordinary announcement

just at the time when I was beginning to investigate the powers of Count Mattei's remedies, and naturally I felt most curious and anxious to know whether this were true. I had no fund of which I could avail myself to visit Southern India and see whether it were so, and I knew it would be utterly useless to ask that I might be included in the Commission, and accordingly I made arrangements for the carrying on of my practice, and went forth at my own charges to make this investigation.

Arrived in Bombay, and cordially welcomed to his house by the homœopathic physician there, I set myself at once to work, and visited in the first instance the Government Asylum for Lepers, and saw many there suffering from this disease in all its manifestations and stages. Hospitals for diseases of the skin are never very attractive to the ordinary student, and I was not surprised to learn that very few ever entered those wards with a view of studying the disease, or endeavouring to provide a remedy. The conditions, so far as could be accomplished, were fairly sanitary and satisfactory; but the reigning impression, from which I could not rid my mind, might be expressed in the words, "Abandon hope, all ye that enter here."

The day following, through the kind arranging of the genial Roman Catholic archbishop, who provided through a friend a steam-launch for the occasion, I was enabled, accompanied by two or three friends, to visit a small leper asylum on a beautiful island a few miles distant from the shore. The situation of this island was most suitable for such a place of refuge for its sad inmates; and yet, due doubtless to the quietude and isolation of their place of domicile, these lepers seemed far happier and brighter than those on the mainland at Bombay. They appeared to be healthier also, though this was not owing to any different treatment which they received, for as yet they had not been supplied with the remedies that were said to have yielded such excellent results at Mangalore.

The next day I visited one of the bazaars or market-places for all manner of merchandise in food and fruit and flowers;

and here I was greatly struck with the circumstance that, walking about freely among the crowd, one would meet every now and then an undoubted leper making purchases like others. In scanning them closely, I could see that the disease was not very visible in the face, but the hands and the feet were distinctly affected. Pausing a little, I could see a leper make his purchases, and pass on, and presently a healthy individual with naked feet would occupy the same spot, and might possibly, if any abrasion in a foot or toe existed, be inoculated with the virus, so that thus easily the continued spread of this disease might be accounted for.

From Bombay I sailed along the coast in a British India steamship for Mangalore, the only passenger the cabin could boast, so that I was liberally offered the whole cabin out of which to choose my berth.

After a few days I arrived at Mangalore, and found that Father Müller, apprised of my approach, was awaiting me with a small boat and a sturdy crew to carry me and my belongings through the seething surf to the peaceful shore. Here I was conveyed at once to the home of an English gentleman, W. Palmer, Esq., the sole banker of this important and beautiful place, to whose genuine, kindly hospitality I was indebted for all the home comforts I enjoyed during the few days I remained at Mangalore. After resting through the day and getting a good night, I sallied forth with Father Müller to inspect the Government lazarettes and his hospital, designated "St. Joseph's Leper Asylum." Of course I enquired at once after the two lepers who had been healed by the Mattei remedies, and received rather a momentary shock of disappointment when he informed me that they were not there, that they had returned to their homes between one and two thousand miles in the interior. On reflection I could easily understand this, as a cleansed leper needed no longer to live apart from kindred and friends. I was then conducted through the asylum, and saw the disease in its various stages, and

learned the several forms of treatment which were being employed: the *internal* medicines being those of Count Mattei, and the *external* Mattei's ointments and lotions, superadded to which were Kühne's steam baths. The results appeared to be most satisfactory, the improvement in many of the patients being very manifest, and altogether their condition and outlook tenfold brighter than those of the lepers I had already seen in the Government asylums.

After spending a pleasant week at Mangalore, I started in a bullock-carriage, kindly placed at my service by the esteemed Bishop of Mangalore, and journeyed for several successive days through the heart of Southern India, passing through many miles of jungle, and crossing a broad river by means of a junga, which took across carriage and oxen. At length I reached the capital of the Coorg district, where I spent the following day (being Christmas), and was most hospitably entertained by the family of an English coffee-planter. Setting out again the next morning, and travelling through the well-ordered territory of the Rajah of Mysore, I soon reached Bangalore, and thence proceeded by rail to Madras. Altogether this was the most eventful of my East Indian journeys, full of thrilling incidents and amusing adventures, which I cannot narrate here. At length, arrived at Madras, I proceeded soon to visit the Government Leper Asylum, and was courteously welcomed and conducted through it by its chief medical officer. This was certainly the best ordered and equipped Government asylum visited by me in any of the Presidencies. I am sorry I cannot at this moment recall the doctor's name, but I was charmed by the affability of his manner, and found him to listen with interest to all I told him of what I had seen and learned at Mangalore. I was in a position, also, to place a certain amount of the remedies in his hands, and explained to him the manner of their use. I have never, however, since received any report of his promised experiments. One thing struck me here forcibly as indicating another very likely means of

propagating this fearfully infectious disease. I observed that as the latticed shutters of the various wards were, even when closed, open to the outer air, every passing mosquito that chose to enter might carry off a portion of some poor leper's blood, and sailing into one or other of the crowded native dwellings outside the asylum precincts, might inoculate one or more of their sleeping inmates. My only surprise was that the disease is not more wide-spread and destructive throughout India and the East than it actually is.

From Madras I proceeded to Calcutta, and here I found the Government Asylum for Lepers the least sanitary and satisfactory that I had visited. I did not see the medical officer, as he was absent at the time of my visit, and I saw no one apparently in charge of the place but the gate-keeper. I was much surprised, too, to notice as I left that several lepers were going out for a walk and others returning from the bazaars at their own sweet wills, every one being a law unto himself. Amongst the worst cases I found a woman about fifty, who had contracted the disease some few years previously. Happily she knew Jesus of Nazareth, and looked forward hopefully to the time when He would set her free from her leprosy for ever and take her to His heavenly home. This was the only bright spot in that sad abode.

I had now visited all the asylums in the principal centres of India, and would gladly have gone into more distant parts, but time would not allow of it; and the conclusion at which I arrived at last after full deliberation was this: that the several remedies employed and relied upon in the various Government asylums do not accomplish anything in the way of arresting and modifying the disease and comforting the diseased to be once compared with the healthier and happier conditions of the lepers in St. Joseph's Asylum at Mangalore.

Since my return from India I have had three cases of this nature to deal with. Two of the patients enjoyed great mitigation of their sufferings and are now at rest. The third

I have heard nothing of for more than a year, and I presume that in this instance the disease is being kept in check, if not cured; so that, while I am not prepared to claim that Mattei's remedies can cure this hitherto incurable disease, I am confident that they can mitigate and modify its course, and so make life less burdensome and death less desirable.

There is another very disagreeable form of illness to which those who "go down to the sea in ships" (especially for the first time) are liable to be exposed—indeed, from which few escape—so that I make no apology for introducing it here before I close this book. I refer to

SEA-SICKNESS.

This may be regarded perhaps more as an ordinary toll levied on landsmen, who have never spent a night upon a ship, than as a serious disease, for frequently the voyage is of such short duration that the first sight of land or the first step upon the shore dispels the uncomfortable sensations and all is forgotten; but when the voyage is prolonged, and the seas roll mountains high against the sides of the ship, the affection is permanent, and never intermits until the voyage is ended and the poor sufferer carried to the shore. One such sufferer I can recall whose sickness began at Plymouth and only ended two or three days before reaching Australia. It was by chance I came to know it. She was a second-class passenger, and I had never walked into that part of the ship till the night in which the second-class passengers invited the cabin passengers to a concert which they held as a sequel to the cabin concert a few nights previously, an interchange of courtesies very common at the termination of a long voyage.

I had obtained the loan of a book before leaving which contained one of the recitations which I admired, and had gone back next morning to return it. While doing so I observed a young woman lying on a couch at the top of the cabin stairs, looking

fearfully ill, and with all the indications of the cause of her sufferings at her side. I spoke sympathetically to her, and learned that she began to be ill the hour she left Plymouth, and had never been free from sickness since, and now scarcely expected to reach her destination, some six or seven days still distant. I felt compassion for her, and went off and brought back a powder of a medicine I had ofttimes used before—*viz. arsenicum* (3rd decimal trituration). I told her I wanted to give her something that I thought would do her good, and asked her to open her mouth whilst I shook it upon her tongue. I did so and left her, but returned an hour or two later when I learned that she had expressed a desire to go to her berth, as she thought she could sleep (sleep frequently follows the administration of the suitable homœopathic medicine). Next morning I returned, and found her again upon her couch, but looking very much brighter than on the previous day. I bade her good-morning, and expressed my pleasure at seeing her looking so well, and congratulated her on her prospect of making a good finish to her voyage. I also added my regret that I had not known of her condition previously, and asked her if she didn't think it strange that so small a dose of medicine, almost tasteless, could (after the many strong remedies that had been tried for her) produce so speedy and desirable a change in her. Her reply well-nigh withered me. She said, "I don't know that that has done it." "Well," I replied, "I'll give you no more until you ask for it, if you should need it," and left her. I had not long to wait for my vindication, though it came about in an indirect way. A rough night followed; her sickness returned; and one or two days of sickness passed, when in the evening the surgeon of the ship, with whose functions I had ventured once to interfere, but determined not to do so again, joined me in a walk upon deck before turning in for the night. He told me he had a patient in the second-class cabin, etc., etc., and he feared she would not survive till she reached her destination, and asked if I could suggest anything

that could help her. I told him I thought I could, and soon gave him sufficient for the present necessity, and if he found it useful, he could, on reaching the port at which they were shortly to call, procure a larger supply. I gave him enough to make a dozen powders, with directions for their use, and learned before I left the ship that the sickness was arrested, and she was slowly recovering her strength. I landed on the arrival of the ship, and have neither seen nor heard of him or the patient since.

Now for the directions necessary for dealing with this malady as briefly and clearly as I can give them.

Let those going a voyage (especially a long one, though equally efficacious in short voyages) provide themselves a few days previously with a tube or two of Count Mattei's *anti-mal-de-mer*, and take five granules, dry or dissolved, during each of three meals, for two days previously, taking five, also dry on the tongue night and morning, and eight or ten on going aboard the ship. Let their food on previous days be light and nutritious and more solid than liquid. Let them, if possible, embark in the evening, after being pretty well fatigued by walking about during the day, and neither eat nor drink for a few hours previously. Let them endeavour to get into their berth prior to the ship sailing, and before settling down let them apply a wet compress to the stomach after this fashion. Having brought with them a piece of stout calico or flannel, about one-half yard long, and of ordinary width, dividing it in two parts and uniting two of the ends so as to form a wide belt, and attaching tapes to secure it with, if they choose, though strong safety-pins are just as good, possibly better. Then take a ship's towel, which is usually folded in three. Fold this again in three, take the outer third of it and dip it in cold water, and then squeeze out the water till it ceases dripping. Then spread the wet portion on the two dry parts, and slowly apply the compress, the wet side next the skin, to the centre of the stomach and upper part of the abdomen (the towel can be

prepared ready for use before entering the berth and laid on one side till wanted); then, the bandage being adjusted round the body, apply the compress, and bring the two ends of the bandage over the compress, and fasten it with the tapes or the safety-pins as firmly as it can comfortably be done, and lie down quietly and try to sleep. If at all subject to headache, apply a small table-napkin or a large linen handkerchief, similarly prepared and wetted as the compress, across the temples. This may be secured by a ribbon or narrow bandage, and tied fairly firm. The *firmness* of the bandage will prevent the stomach from vibrating, the *coldness* of the compress will drive away the blood from the superficial vessels and draw it down from the brain; and the probability is that the person doing this aright will fall soundly asleep in a few minutes, and only wake to hear the steward's or stewardess's cheerful voice enquiring if you would like a morning cup of tea. You may repeat this application a second night and even a third, or you may wear it continuously for two or three days, if you feel the better for it, but by that time you will be able to dispense with it altogether. Should you by any means become sick (as you may if you have not been very careful in your selection of food for the first few days, as you should have been the few days previous to embarking), then dissolve one or two granules of the *anti-mal-de-mer* in a tumbler of water, and take it by sips every ten or fifteen minutes, lengthening the interval on improvement. Should the sickness not yield soon to this, take two or three grains of the *arsenicum album* (3^x trituration), procured before starting at some homœopathic chemist's. Should you suffer simultaneously from headache, as many do, be provided with a half-ounce bottle of the tincture of *belladonna* 3^x, and put ten or twelve drops in a small tumbler of water, and take a dessertspoonful every fifteen or twenty minutes, lengthening the interval on improvement, and leaving it off when well.

I may add, finally, that in any case of fever, either in child or

adult, the immediate application of a wet compress to the stomach, accompanied by two or three doses of *aconitum* 3^x, prepared and taken as the belladonna, will ofttimes arrest the fever and prevent the outbreak of serious illness. If the throat be affected—as in *quinsy* or *scarlet fever*—put a wet compress on the *front* of the throat, and take or give *aconite* and *belladonna*, prepared as above, alternately, at *hourly* intervals at first, and lengthen the intervals as improvement sets in.

SUMMARY.

In the foregoing pages I have fully recognised the marvellous advance which has been made in almost every art and science during the memorable reign of our gracious Sovereign, Queen Victoria.

I have cheerfully acknowledged that in the science of healing and the art of surgery wonderful discoveries have been made. Thus the microscope and the stethoscope, the clinical thermometer, the sphygmograph, and the Röntgen rays, have virtually revolutionised the diagnosis of disease; whilst the discovery of *anæsthesia* in 1847, and of *antiseptics* in 1876, has rendered the most formidable operations easy and (to use the euphemistic adjective commonly employed in describing them) "successful."

Yet when we come to consider the most common and frequent, as well as the most simple and serious of all operations, those undertaken for the relief and removal of cancerous growths, and which "the merest tyro will fearlessly undertake," according to Dr. Snow, we are confronted with the strange anomaly that whereas for the most part all other forms of operation yield the most gratifying results to patients and surgeons alike, these are for the most part sadly disappointing and universally unsatisfactory.

Indeed, so little amenable are these forms of disease to *removal* (it would be an abuse of language to speak of *eradication*) by the knife, that it only seems to wake up their malignant character, and lay the foundation for a rapidly recurring necessity for further and deeper operations, whereby the patients are plunged into ever increasing sufferings, and

doomed to a much earlier death than would otherwise await them.

No other cause can so fully explain not only the alarming increase of cancer in the community, but also the rapidly increasing mortality connected with it.*

The statistics of the Registrar-General during the Queen's reign, the systematic preparation of which only began about the year 1837, present the saddest record of an ever deepening and darkening calamity that has overtaken our nation in this respect which can possibly be conceived. Look again at the pages which record the successive ravages of this fell destroyer, "read, mark, learn, and inwardly digest them," and then resolve that, God helping you, you will do what you can to expose, denounce, and terminate this terrible blot upon a reign that has otherwise been so fruitful of prosperity and blessing.

Take the simple, unadorned facts that in the year 1837 the mortality from this disease was, from June till December, 1,228 (or 158 per million of the population then living), whereas in 1897 it was 24,443 (or 787 per million—almost fivefold), with a population slightly more than twice as large as that of 1837.

We should also consider well the additional startling fact that whereas in the *ordinary annual mortality* from "all diseases" throughout the first and second decades of the Queen's reign there appears, from the Registrar-General's returns, to have been a much heavier mortality of males than of females from all causes, there has for a long time been a phenomenally large mortality amongst females with respect to this one sad disease of cancer. This is frequently explained by saying that the disease is more common amongst women than amongst men. This, alas! is sadly true nowadays; but there is no valid reason why it should be so! They have the same flesh and blood and the same chances of longevity and health from the very outset. Indeed, the odds should be largely in their favour, when it is

* As to the increase of cancer, and its several causes, see "The Cancer Controversy" (Bumpus, 350, Oxford Street, W; price 1*s.*).

considered how free they are from exposure to the unnumbered accidents to which men are liable in the various avocations of life. The multitudes that are cut down prematurely by war, shipwreck, and occupations of a highly dangerous nature, should yield a large balance of life in their favour. There are two reasons, altogether distinct from each other, that may account for this disparity; the first, that there is a cause to account for the more frequent occurrence of this disease in women than in men, and which operates very prejudicially—*i.e.* the deadly habit of *tight lacing*, which originates more than half the troubles that affect the female breast. The other reason is that *women are more easily persuaded to undergo operations than men*; and I have no hesitation in affirming my deliberate opinion, founded upon an extensive experience, that were all operations for this disease put a stop to to-morrow by an Act of Parliament, the mortality would at once begin to decline as rapidly as it has risen in past years, so that ere ten years were gone the Registrar-General, in his closing survey, would characterise the sudden change from the ever increasing mortality of previous decades as at once unparalleled and inexplicable.*

The primary object of the preceding pages has been mainly to point out and emphasise the big, black blot on the Queen's reign—*viz.* the terrible drain on the best life of the nation, arising from the persistent treatment of all cancerous tumours by operative measures; and I contend that the alarming, but

* This very day I have received the following in a letter from a lady at Glasgow, dated January 29th, 1900: "About nine years ago, I consulted you in London about a tumour in my leg, which my doctor advised me to have removed, and which I, having a great dread of the knife, refused. You told me on no account to meddle with it, as simple tumours often became malignant when cut. I took your advice, and it has given me little trouble. Unfortunately, another has developed in my breast, and again the doctors advise me strongly to have it removed. They cannot say whether it is *simple* or *malignant*. They want to take it out to make sure of its character. What do you advise me to do?" I need scarcely add that I have advised her to act now as she acted before, and decline operation and resume the former treatment.

incontestable statistics of the Registrar-General fully justify me in using the strongest possible language to denounce their continuance, and demand, in the name of God and of Humanity, that they shall cease at once and cease for ever; that the rulers of the nation who have in time past enacted, and should continue to enact, wise and wholesome laws for the prevention and extinction of that other dreadful scourge where it finds free swing (I mean small-pox), shall take similar measures with reference to this terrible and ever increasing disease of cancer.

Why should not our rulers at once appoint a Royal Commission to investigate this whole subject, and examine every witness that can throw any fresh light upon its treatment, and especially insist upon a fair, honest, and unprejudiced trial of any means or measures, whether "pharmacopœial" or "extra-pharmacopœial," concerning which trustworthy men and women can testify that their lives have been greatly prolonged and even saved by their use.

There is another singular anomaly to be explained—*viz.* how all this mortality has gone on increasing with an intensified persistency, despite the introduction in 1847 of that marvellous destroyer of pain—chloroform, and in 1876 of that equally marvellous healer of wounds made in operating—carbolic acid. What these wonderful discoveries have done for men, or rather, I should say, for women, in connection with this sad disease, let the Registrar-General's faithful statistics bear witness!

Another matter must also enter into our anxious enquiries on these matters—*viz.* how comes it to pass that while the discovery and application of important sanitary laws, and new and powerful disease-attacking and preventing remedies, during the Queen's reign, have done so much for the community in the way of saving countless thousands of precious lives, nothing has yet been propounded within the precincts of the profession for the arrest of this desolating scourge, nothing suggested by surgeons but (for this is the latest authoritative word on the

subject) "where there is widespread disease, there should be sweeping removal"?

And nothing yet has been found by *physicians* (except occasionally by accident) to deal effectually with such desolating diseases as pneumonia, broncho-pneumonia, bronchitis, whooping-cough, diphtheria, measles, scarlet fever, typhoid fever, and such-like diseases, whose ravages are but little, if at all, affected by the modern discoveries of medicine.

LORD IVEAGH'S MUNIFICENT GIFT.

Perhaps the most remarkable incident in our Sovereign's reign, in its possible wonderful influence on the science of healing in the future, is the magnificent gift of a quarter of a million of money by Lord Iveagh for the equipment of an "Institute of Preventive Medicine," as it is at one time termed, and at another for the "Prevention of Consumption." Now this regal offering at the shrine of Æsculapius, or rather, I will say, of humanity, may prove a great blessing or a great curse, just as the work of this Institute shall be inaugurated and carried forward: for it may become either a mighty stimulus to original research, or an infallible method of stereotyping the fossilised postulates and dying axioms of the past. One thing is perfectly certain, that if the generous donor really desires that this and future generations shall reap a full benefit from the expenditure of this princely endowment, he will see well to it that the trustees of this fund shall not consist exclusively of distinguished physicians and surgeons only (who are constitutionally opposed to every new form of treatment or remedy that may be proposed from the outside of the profession), but that an equal number, at least, shall consist of men famous in literature, and in the arts and sciences, and, therefore, equally capable of judging of the merits or demerits of any new departure. I would certainly enlarge its scope and place cancer on the same platform as consumption; for whilst the latter is

certainly materially modified by the improved sanitary laws and more wholesome nutrition of these times, as well as by the increasing mildness of the winters, there is too much reason to fear that if the former advances at the same rate as it has done since the Queen ascended the throne, it will not be long before it will attain the same sad pre-eminence which consumption formerly occupied.

The practical conclusion of the whole matter is thus forcibly expressed by Dr. Herbert Snow, and I am happy for once to be in full accord with him, as he respectfully submits "that the yearly increasing ravages of cancer constitute an extraordinary danger, demanding extraordinary measures for their curtailment or suppression; that the community should hardly, as now, meet the trouble passively with folded hands; that action by the State is imperatively indicated." This, of course, may be supplemented by private munificence, wisely seeking to promote scientific research and technical education, no less than popular enlightenment.

In closing this humble contribution to a deeply momentous subject, and with reference especially to the intensely important question of the treatment of cancer in the future, I would make the following observations:—

1. That if cancer be subjected to the Mattei treatment, in the earliest stage of its manifestation, when the tumour is first recognised, and as yet free from glandular and constitutional complications, its arrest or removal is, in a large proportion of cases, attainable.

2. That when this most hopeful stage has passed, and the various unfavourable indications are present (which used to be regarded as an absolute bar to operation, but now accounted an additional stimulus), patients have a much better prospect of life and immunity from future sufferings by declining to be mutilated than by subjecting themselves to repeated operations, which a first one involves.

3. That in all stages of the disease, even after several

operations and subsequent recurrence, *the Count's remedies have prevailed to accomplish perfect cures*; and where they have failed to do this, they have afforded such abundant relief from the sufferings incidental to this sad disease that those who have employed them (and their friends after their decease) have heartily testified to their unspeakable value.

We do not allege that *many* cases in this category have been completely cured, or that the cure has been so complete in any case that the disease may not break out again in future years, especially where the subject of it is young or middle-aged; but that for the time being the patients have been as thoroughly freed from the disease as though they had recovered from any other disease which flesh is heir to, whilst still liable to future attack. We do not wish it to be supposed, either, that we account the cure of cancer in every case that presents itself to be either *easy* or *certain*; but we are fully persuaded that, despite all the opposition to the Mattei treatment, the day is not far distant when the profession itself (which hesitated a long time before accepting many of the discoveries which have enabled it to do great things for the human race) will begin to use and recognise the value of this benign treatment.

SAMUEL KENNEDY, L.R.C.P. AND L.R.C.S. EDIN.

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